Image# 15951113579 PAGE 1 / 113

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| 1 OTTIM OX | For Other Than A | An Authorized | Committe | e | | Office Use Only | |
|---|----------------------------------|----------------------|---------------------------------|-------------------|-------------------|----------------------|---|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | | mple: If typino r the lines. | g, type | 12FE4M5 | | |
| DEMOCRATIC PAR | TY OF ILLINOIS | | | | | | |
| | | | | | | | 1 |
| ADDRESS (number and street) | P.O. BOX 518 | | | | | | |
| | 1. | | 1 1 1 1 | | | | |
| Check if different than previously reported. (ACC) | SPRINGFIELD | | | | IL L | 62705 | - |
| 2. FEC IDENTIFICATION | NUMBER ▼ | CITY 🛦 | | S | TATE 🛦 | ZIP CO | DE 🛦 |
| C C00167015 | | 3. IS THIS REPORT | NI (N | EW) OR | × AM (A) | ENDED | |
| 4. TYPE OF REPORT (Choose One) | (b) Monthly Report Due On: | Feb 20 (M2) | | ay 20 (M5) | | 20 (M8) | Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) |
| (a) Quarterly Reports: | L | Mar 20 (M3) | | ın 20 (M6) | Sep 7 | 20 (M9) | (Non-Election Year Only) |
| April 15 | | Apr 20 (M4) | Jι | ıl 20 (M7) | Oct 2 | 20 (M10) × | Jan 31 (YE) |
| Quarterly Report | (C) 12-Day | ction | Primary (12P) | | General (| 12G) | Runoff (12R) |
| Quarterly Report October 15 | Report to | or the: | Convention (1 | 2C) | Special (1 | 12S) | |
| Quarterly Report January 31 | | Election on | M M / | D D / | Y Y Y Y Y | in the State o | of _ |
| Year-End Report July 31 Mid-Year Report (Non-elect Year Only) (MV) | (d) 30-Day | | General (30G) | | Runoff (3 | | Special (30S) |
| Year Only) (MY) Termination Repo | Report fo | | (333) | | | | oposiai (oco) |
| (TER) | | Election on | M = M / | D = D / | Y | in the State o | of |
| 5. Covering Period | 11 25 Y | 2014 | through | 12_ | / 31 / | 2014 | |
| I certify that I have examined | this Report and to the | best of my know | wledge and be | elief it is true | e, correct and | complete. | |
| Type or Print Name of Treasu | urer Michael Kasper | | | | | | |
| Signature of Treasurer $\stackrel{M}{-}$ | ichael Kasper | | [Electronically | Filed] Da | ate 04 | 07 | 2015 |
| NOTE: Submission of false, err | oneous, or incomplete in | formation may su | bject the perso | on signing thi | s Report to th | e penalties of 2 l | U.S.C. §437g. |
| Office Use Only | | | | | | FEC FOR Rev. 12/2 | |
| I LUIIVI | 1 1 | 1 1 | I | | | | |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

| | DEMOCRATIC PARTY OF ILLINO | | |
|-----|--|-------------------------|---|
| R | deport Covering the Period: From: 11 | 1 25 2014 | To: 12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
| 6. | (a) Cash on Hand January 1, 2014 | | 763467.65 |
| | (b) Cash on Hand at Beginning of Reporting Period | 1204849.84 | |
| | (c) Total Receipts (from Line 19) | 627040.39 | 6130323.63 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 1831890.23 | 6893791.28 |
| 7. | Total Disbursements (from Line 31) | 112335.96 | 5174237.01 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 1719554.27 | 1719554.27 |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|--|---|
| ntributions (other than loans) From: | | |
| Individuals/Persons Other | | |
| Than Political Committees | | 1 |
| (i) Itemized (use Schedule A) | 7250.00 | 628844.00 |
| (ii) Unitemized | , 150.00 | 11643.00 |
| Lines 11(a)(i) and (ii) | 7400.00 | 640487.00 |
| Political Party Committees | 19362.60 | 76317.07 |
| Other Political Committees (such as PACs) | 36500.43 | 3125036.37 |
| Total Contributions (add Lines | | , |
| 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 63263.03 | 3841840.44 |
| | 0.00 | 0.00 |
| ., | | |
| Loans Received | 0.00 | 0.00 |
| an Repayments Received | 0.00 | 0.00 |
| sets To Operating Expenditures | | |
| efunds, Rebates, etc.) | | |
| arry Totals to Line 37, page 5) | 0.00 | 15750.00 |
| funds of Contributions Made | | |
| Federal Candidates and Other | | |
| litical Committees | 0.00 | 0.00 |
| ner Federal Receipts | | |
| vidends, Interest, etc.) | 39100.00 | 461350.13 |
| Insfers from Non-Federal and Levin Funds | 7 | |
| Non-Federal Account | | |
| (from Schedule H3) | 64496.87 | 568300.11 |
| Levin Funds (from Schedule H5) | 460180.49 | 1243082.95 |
| | 7 | 7 |
| Total Transfers (add 18(a) and 18(b)) | 524677.36 | 1811383.06 |
| | Than Political Committees (i) Itemized (use Schedule A) | Than Political Committees (i) Itemized (use Schedule A) |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|---|----------------------------|-----------------------------------|--|--|
| 21. Operating Expenditures: (a) Allocated Federal/Non-Federal | | Calcildai Tear-to-Date | | |
| Activity (from Schedule H4) | | | | |
| (i) Federal Share | 13454.31 | 148793.49 | | |
| (ii) Non-Federal Share | 50613.87 | 559747.20 | | |
| (b) Other Federal Operating | | | | |
| Expenditures | 11160.43 | 41320.09 | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ | 75228.61 | 749860.78 | | |
| Transfers to Affiliated/Other Party | | | | |
| CommitteesContributions to | 0.00 | 0.00 | | |
| Federal Candidates/Committees and Other Political Committees | 0.00 | 0.00 | | |
| Independent Expenditures | 0.00 | 0.00 | | |
| (use Schedule E) Coordinated Party Expenditures | 0.00 | 0.00 | | |
| (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 | | |
| Loan Repayments Made | 0.00 | 0.00 | | |
| Loans MadeRefunds of Contributions To: | 0.00 | 0.00 | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | | |
| #N = = = | 0.00 | 0.00 | | |
| (b) Political Party Committees(c) Other Political Committees | 0.00 | 0.00 | | |
| (such as PACs) | 0.00 | 0.00 | | |
| (d) Total Contribution Refunds | | | | |
| (add Lines 28(a), (b), and (c))▶ | 0.00 | 0.00 | | |
| Other Disbursements | 0.00 | 0.00 | | |
| E | | | | |
| Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity | | | | |
| (from Schedule H6) (i) Federal Share | 0.00 | 334444.02 | | |
| (7) | | | | |
| (ii) "Levin" Share(b) Federal Election Activity Paid Entirely | 0.00 | 1258146.54 | | |
| With Federal Funds | 37107.35 | 2831785.67 | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | 37107.35 | 4424376.23 | | |
| Total Disbursements (add Lines 21(c). 22. | | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 112335.96 | 5174237.01 | | |
| | | | | |
| | 61722 09 | 3356343.27 | | |
| | 112335.96 61722.09 | | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 63263.03 | 3841840.44 |
| 4. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 63263.03 | 3841840.44 |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 24614.74 | 190113.58 |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 15750.00 |
| 8. Net Operating Expenditures (subtract Line 37 from Line 36) | 24614.74 | 174363.58 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | | 6 | OF | 113 |
|------------------|------------------|--|-----|--|------|--|----|----|-----|
| (ch | (check only one) | | | | | | | | |
| | 11a | | 11b | | 11c | | 12 | 2 | |
| | 13 | | 14 | | 15 | | 16 | 6 | 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| or for commercial purposes, other than using the | ne name and address of any political committee to | solicit contributions from such committee. | | |
|---|--|---|--|--|
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILL | LINOIS | | | |
| Full Name (Last, First, Middle Initial) Michael McClaion Mailing Address 1300 Tuscany Drive | | Date of Receipt | | |
| City Quincy | State Zip Code IL 62305 | 11 25 2014 Transaction ID : SA11AI.36861 Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | 1000.00 Contribution | | |
| Name of Employer IRMA Receipt For: Primary General | Occupation Executive Vice President Aggregate Year-to-Date ▼ 2500.00 | | | |
| Full Name (Last, First, Middle Initial) 3. Miguel Ortega | 2500.00 | Date of Receipt | | |
| Mailing Address 11310 W. 72nd Street City | State Zip Code | 11 25 2014 Transaction ID : SA11AI.36864 | | |
| Burr Ridge FEC ID number of contributing federal political committee. | IL 60527 | Amount of Each Receipt this Period 250.00 | | |
| Name of Employer Commonwealth Edison Receipt For: | Occupation Director Aggregate Year-to-Date ▼ | Contribution | | |
| Primary | 250.00 | | | |
| Full Name (Last, First, Middle Initial) Luz Perez Mailing Address 1695 Ashbury Drive | | Date of Receipt | | |
| City Lemont | State Zip Code IL 60439 | Transaction ID : SA11AI.36870 Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | Occupation | 1000.00 Contribution | | |
| Name of Employer Commonwealth Edison Receipt For: | Occupation Vice President Aggregate Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | 1000.00 | | | |
| SUBTOTAL of Receipts This Page (optional) | <u> </u> | 2250.00 | | |
| TOTAL This Period (last page this line number | r only) | | | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

| TOTAL HOMBETT | | | | | PAGE | : | 7 | OF | 113 | |
|------------------|---|-----|--|-----|------|-----|---|----|-----|----|
| (check only one) | | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | ! | |
| | | 13 | | 14 | | 15 | | 16 | ; | 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| or for commercial purposes, other than using | g the name and address of any political committee to | solicit contributions from such committee. | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF I | LLINOIS | | |
| Full Name (Last, First, Middle Initial) Mark Triffler Mailing Address 32 Ruffled Feather Drive | | Date of Receipt | |
| City Lemon | State Zip Code IL 60439 | 11 25 2014 Transaction ID : SA11AI.36872 Amount of Each Receipt this Period | |
| FEC ID number of contributing federal political committee. | C | 5000.00 | |
| Name of Employer S4 Group Receipt For: | Occupation Executive | Contribution | |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | | |
| Full Name (Last, First, Middle Initial) 3. Mailing Address | | Date of Receipt | |
| City | State Zip Code | Amount of Each Receipt this Period | |
| FEC ID number of contributing federal political committee. | С | | |
| Name of Employer | Occupation | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt | |
| Mailing Address City | State Zip Code | M = M / D = D / Y = Y = Y | |
| FEC ID number of contributing | | Amount of Each Receipt this Period | |
| federal political committee. Name of Employer | Occupation | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | | |
| SUBTOTAL of Receipts This Page (optional | ıl) | 5000.00 | |
| TOTAL This Period (last page this line num | nber only) | 7250.00 | |

S 17

| | age# 13331113300 | | | | |
|--|---|--|---|--|--|
| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 OF 113 (check only one) 11a X 11b 11c 12 13 14 15 16 17 | |
| | ny information copied from such Reports and St for commercial purposes, other than using the | | | | |
| | NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLII | NOIS | | | |
| Α. | Full Name (Last, First, Middle Initial) DEMOCRATIC NATIONAL COMMITT | EE - TRA\ | /EL OFFSET ACCOUNT | Date of Receipt | |
| | Mailing Address 430 SOUTH CAPITOL STREE | ling Address 430 SOUTH CAPITOL STREET SE | | | |
| | City WASHINGTON | State DC | Zip Code 20003 | Transaction ID : SA11B.36860 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C coo | 0460147 | 4840.00 | |
| | Name of Employer | Occupation | | Contribution | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 32434.09 | | |
| В. | Full Name (Last, First, Middle Initial) DEMOCRATIC NATIONAL COMMITTEE - TRA Mailing Address 430 SOUTH CAPITOL STREET SE | | EL OFFSET ACCOUNT | Date of Receipt 12 23 2014 | |
| | City | State | Zip Code | Transaction ID : SA11B.36902 | |
| | WASHINGTON FEC ID number of contributing federal political committee. | C coo | 20003 | Amount of Each Receipt this Period 9682.60 | |
| | Name of Employer | Occupation | | Contribution | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 42116.69 | | |
| C. | Full Name (Last, First, Middle Initial) DEMOCRATIC NATIONAL COMMIT | TEE - TR | AVEL OFFSET ACCOUNT | Date of Receipt | |
| Mailing Address 430 SOUTH CAPITOL STREET S | | | | 12 30 2014 | |
| | City WASHINGTON | State DC | Zip Code 20003 | Transaction ID : SA11B.36903 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C cod | 0460147 | 4840.00 | |
| | Name of Employer | Occupation | | Contribution | |

Aggregate Year-to-Date ▼

46956.69

19362.60

19362.60

Receipt For:

Primary

Other (specify) ▼

General

SUBTOTAL of Receipts This Page (optional).....

| Date of Receipt Date of Receipt Transaction ID: SA11C.36912 Amount of Each Receipt this Period Contribution Contribution Date of Receipt this Period |
|--|
| Transaction ID: SA11C.36912 Amount of Each Receipt this Period 23910.00 Contribution |
| Transaction ID: SA11C.36912 Amount of Each Receipt this Period 23910.00 Contribution |
| Transaction ID : SA11C.36912 Amount of Each Receipt this Period 23910.00 Contribution |
| 23910.00 Contribution 2832664.52 |
| Contribution 2832664.52 |
| 2832664.52 |
| 2832664.52 |
| Date of Receipt |
| Date of Receipt |
| <u> </u> |
| 11 25 _ 2014 _ |
| Transaction ID : SA11C.37525 |
| Amount of Each Receipt this Period |
| 7877.07 |
| In-kind - cover services and equipment |
| 2840541.59 |
| Date of Receipt |
| 12 11 _ 2014 _ |
| Transaction ID : SA11C.36885 Amount of Each Receipt this Period |
| 430.00 |
| Travel reimbursement |
| 2840971.59 |
| |

TOTAL This Period (last page this line number only).....

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 10 OF 113 (check only one) | | | |
|---|--------------|---|--|--|--|--|
| ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | 11a 11b X 11c 12 13 14 15 16 17 | | | |
| Any information copied from such Reports and or for commercial purposes, other than using the | | | erson for the purpose of soliciting contributions | | | |
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILL | LINOIS | | | | | |
| Full Name (Last, First, Middle Initial) A. HOYER FOR CONGRESS | | | Date of Receipt | | | |
| Mailing Address 700 13TH STREET, NW | | | M = M / D = D / Y = Y = Y | | | |
| SUITE 600 City | State | Zip Code | 11 25 2014 Transaction ID : SA11C.37531 | | | |
| WASHINGTON | DC | 20005 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C co | 0140715 | 2247.91 | | | |
| Name of Employer | Occupation | | In-kind - Travel | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 13483.67 | | | | |
| Full Name (Last, First, Middle Initial) B. HOYER FOR CONGRESS | | | Date of Receipt | | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 | | 11 25 2014 | | | | |
| City | State | Zip Code | Transaction ID : SA11C.37533 | | | |
| WASHINGTON | DC | 20005 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C cod | 0140715 | 137.22 | | | |
| Name of Employer | Occupation | | In-kind - Travel | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 13620.89 | | | | |
| Full Name (Last, First, Middle Initial) C. NANCY PELOSI FOR CONGRE | :SS | | Date of Receipt | | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 | | | 12 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| City WASHINGTON | State DC | Zip Code 20005 | Transaction ID : SA11C.37527 Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C co | 0213512 | 722.20 | | | |
| Name of Employer | Occupation | | In-kind - Travel | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 15722.20 | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 3107.33 | | | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 11 OF 113 (check only one) |
|---|-------------------------------|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILL | ne name and a | | erson for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS Mailing Address 700 13TH STREET, NW SUITE 600 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | Occupation | Zip Code 20005 0213512 Year-to-Date ▼ | Date of Receipt 12 01 2014 Transaction ID: SA11C.37529 Amount of Each Receipt this Period 176.03 In-kind - Travel |
| Full Name (Last, First, Middle Initial) B. NARRAGANSETT BAY PAC Mailing Address PO BOX 8628 City CRANSTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | Occupation | Zip Code 02920 0403592 Year-to-Date ▼ | Date of Receipt 11 25 2014 Transaction ID: SA11C.36862 Amount of Each Receipt this Period 1000.00 Contribution |
| Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify) | State C Occupation Aggregate | Zip Code Year-to-Date ▼ | Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period |
| SUBTOTAL of Receipts This Page (optional) | | | 1176.03 |

TOTAL This Period (last page this line number only).....

36500.43

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | for each ca Detailed Su | ate schedule(s) ategory of the ummary Page | FOR LINE NUMBER: PAGE 12 OF 113 (check only one) 11a | | | | |
|---|----------------------------|--|---|--|--|--|--|
| Any information copied from such Reports and S or for commercial purposes, other than using the | | | | | | | |
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLI | NOIS | | | | | | |
| Full Name (Last, First, Middle Initial) A. 13th Ward Democratic Organization | | | Date of Receipt | | | | |
| Mailing Address 6500 South Pulaski | | | 12 15 2014 | | | | |
| City Chicago | State Zip Code IL 60629 | | Transaction ID : SA17.36886 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | С | | 750.00 | | | | |
| Name of Employer | Occupation | | Voter file | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date | 750.00 | | | | | |
| Full Name (Last, First, Middle Initial) B. 17th Ward Democratic Organization | | | Date of Receipt | | | | |
| Mailing Address 7811 S. Racine | | | 12 30 2014 | | | | |
| City Chicago | State Zip Code IL 60620 | | Transaction ID : SA17.36906 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | С | | 750.00 | | | | |
| Name of Employer | Occupation | | Voter file | | | | |
| Receipt For: □ Primary □ General □ Other (specify) ▼ | Aggregate Year-to-Date | 750.00 | | | | | |
| Full Name (Last, First, Middle Initial) C. 19th Ward Democratic Organization | on | | Date of Receipt | | | | |
| Mailing Address 10444 S. Western Avenue | | | 12 15 2014 | | | | |
| City Chicago | State Zip Code IL 60643 | | Transaction ID : SA17.36887 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | | | |
| Name of Employer | Occupation | | Voter file | | | | |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date | 750.00 | | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2250.00 | | | | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 13 OF 113 (check only one) | | | | | |
|---|--------------------------------------|---|---|--|--|--|--|--|
| ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | 11a 11b 11c 12 13 14 15 16 X 17 | | | | | |
| | | | erson for the purpose of soliciting contributions to solicit contributions from such committee. | | | | | |
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF I | LLINOIS | | | | | | | |
| Full Name (Last, First, Middle Initial) A. 8th Ward Democratic Committee | | | Date of Receipt | | | | | |
| Mailing Address 8539 S. Cotage Grove | Mailing Address 8539 S. Cotage Grove | | | | | | | |
| City | State | Zip Code | 12 30 2014 Transaction ID : SA17.36905 | | | | | |
| Chicago | IL | 60619 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Y | ear-to-Date ▼ 750.00 | | | | | | |
| Full Name (Last, First, Middle Initial) B. Calumet Township Democratic (| Drganization | | Date of Receipt | | | | | |
| Mailing Address 2030 High St | 3 | | 12 15 2014 | | | | | |
| City | State | Zip Code | Transaction ID : SA17.36890 Amount of Each Receipt this Period | | | | | |
| Blue Island | IL . | 60406 | | | | | | |
| FEC ID number of contributing federal political committee. | С | | 500.00 | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Y | ear-to-Date ▼ 500.00 | | | | | | |
| Full Name (Last, First, Middle Initial) C. Chicago Forward | | | Date of Receipt | | | | | |
| Mailing Address 201 W. Lake Street | | | 12 152014 | | | | | |
| City Chicago | State IL | Zip Code 60606 | Transaction ID : SA17.36891 Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | С | | 10000.00 | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Y | ear-to-Date ▼ 10000.00 | | | | | | |
| SUBTOTAL of Receipts This Page (optional | l) |) | 11250.00 | | | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 14 OF 113 (check only one) 11a 11b 11c 12 13 14 15 16 🗶 17 | | | | | |
|------------|--|-------------|---|--|--|--|--|--|--|
| | | | | person for the purpose of soliciting contributions e to solicit contributions from such committee. | | | | | |
| | NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILL | INOIS | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Citizens for Heather Sattler Mailing Address 5501 W. Cullom | | | Date of Receipt | | | | | |
| | City Chicago | State IL | Zip Code 60641 | Transaction ID : SA17.36898 Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 750.00 | | | | | |
| | Name of Employer | Occupation | 1 | Voter file | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 750.00 |] | | | | | |
| — В. | Full Name (Last, First, Middle Initial) Citizens for Maldonado | | | Date of Receipt | | | | | |
| | Mailing Address 1731 North Troy Street | | | 12 30 2014 | | | | | |
| | City Chicago | State IL | Zip Code 60647 | Transaction ID : SA17.36909 Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 750.00 | | | | | |
| | Name of Employer | Occupation | | Voter file | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 750.00 | | | | | | |
| <u>с</u> . | Full Name (Last, First, Middle Initial) Citizens to Elect David Moore | | | Date of Receipt | | | | | |
| | Mailing Address 8042 S. Kedzie Street | | | 12 15 2014 | | | | | |
| | City Chicago | State IL | Zip Code 60652 | Transaction ID : SA17.36893 Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | С | | 750.00 | | | | | |
| | Name of Employer | Occupation | ı | Voter file | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 750.00 | | | | | | |
| | UBTOTAL of Receipts This Page (optional) | | | 2250.00 | | | | | |

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| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate for each cate Detailed Sum | tte schedule(s) (check only one) ttegory of the | (check only one) | | | | | |
|---|--|---|------------------|--|--|--|--|--|
| | | or used by any person for the purpose of soliciting contribution political committee to solicit contributions from such committee | tions | | | | | |
| DEMOCRATIC PARTY OF | ILLINOIS | | | | | | | |
| A. Committee to Elect Robert J. Lov Mailing Address 6536 W. Cermak | ero | Date of Receipt | V | | | | | |
| maining Address 6550 W. German | | 12 30 2014 | 1 | | | | | |
| City | State Zip Code | Transaction ID : SA17.36908 | | | | | | |
| Berwyn | IL 60402 | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | С | 750. | .00 | | | | | |
| Name of Employer | Occupation | Voter file | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | , | | | | | | |
| Primary General Other (specify) ▼ | | 750.00 | | | | | | |
| Full Name (Last, First, Middle Initial) B. Committee to Elect Stacey Pfine | ull Name (Last, First, Middle Initial) Committee to Elect Stacey Pfingsten | | | | | | | |
| Mailing Address P.O. Box 14034 | | 11 25 2014 | | | | | | |
| City | State Zip Code | Transaction ID : SA17.36878 | | | | | | |
| Chicago | IL 60614 | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | С | 750.0 | 750.00 | | | | | |
| Name of Employer | Occupation | Voter file | | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | 750.00 | | | | | | |
| Full Name (Last, First, Middle Initial) C. Friends of Alderman Ray Sua | rez | Date of Receipt | | | | | | |
| Mailing Address 4502 W. Fullerton Avenu | е | 11 25 _ 2014 _ | Υ | | | | | |
| City Chicago | State Zip Code IL 60639 | Transaction ID : SA17.36882 Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | C | 750. | .00 | | | | | |
| Name of Employer | Occupation | Voter file | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | <u>, </u> | | | | | | |
| Primary General Other (specify) ▼ | 7 | 750.00 | | | | | | |
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| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 16 OF 113 (check only one) 11a | | | | |
|---|-------------|---|--|--|--|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the | | | person for the purpose of soliciting contributions e to solicit contributions from such committee. | | | | |
| NAME OF COMMITTEE (IN FUII) DEMOCRATIC PARTY OF ILL | LINOIS | | | | | | |
| Full Name (Last, First, Middle Initial) A. Friends of Alyx Pattison | | | Date of Receipt | | | | |
| Mailing Address 1111 N. Western Avenue | | | 12 15 2014 | | | | |
| City Chicago | State IL | Zip Code 60622 | Transaction ID : SA17.36896 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | С | | 750.00 | | | | |
| Name of Employer | Occupation | 1 | Voter file | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 750.00 | | | | | |
| Full Name (Last, First, Middle Initial) B. Friends of Joann Thompson | | | Date of Receipt | | | | |
| Mailing Address 5335 S. Western Boulevard | | | 12 30 2014 | | | | |
| City Chicago | State IL | Zip Code 60609 | Transaction ID : SA17.36910 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | С | | 750.00 | | | | |
| Name of Employer | Occupation | 1 | Voter file | | | | |
| Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 750.00 | | | | | |
| Full Name (Last, First, Middle Initial) C. Friends of Mike Zalewski | | | Date of Receipt | | | | |
| Mailing Address 5838 S. Archer Avenue | | | 11 25 2014 | | | | |
| City Chicago | State IL | Zip Code 60638 | Transaction ID : SA17.36884 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | С | | 750.00 | | | | |
| Name of Employer | Occupation | 1 | Voter file | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 750.00 | | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2250.00 | | | | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 17 OF 113 (check only one) 11a 11b 11c 12 13 14 15 16 X 17 | | | | | |
|---|-----------------|---|---|--|--|--|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | e name and addi | | erson for the purpose of soliciting contributions | | | | | |
| ig angle DEMOCRATIC PARTY OF ILL | INOIS | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Friends of Omar Aquino | | | Date of Receipt | | | | | |
| Mailing Address 2067 N. Lorel Avenue | | | 11 25 2014 | | | | | |
| City Chicago | State IL | Zip Code 60639-3027 | Transaction ID : SA17.36874 Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ar-to-Date ▼ 750.00 | | | | | | |
| Full Name (Last, First, Middle Initial) B. Howard B. Brookins, Jr. Attorney a | Date of Receipt | | | | | | | |
| Mailing Address 9636 South Winston Avenue | | | 12 15 2014 Transaction ID : SA17.36888 | | | | | |
| City | State IL | Zip Code | | | | | | |
| Chicago FEC ID number of contributing federal political committee. | С | 60643 | Amount of Each Receipt this Period 750.00 | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ar-to-Date ▼ 750.00 | | | | | | |
| Full Name (Last, First, Middle Initial) C. Mondragon For A New Illinois | I | | Date of Receipt | | | | | |
| Mailing Address 27 N. Wacker Drive | | | 11 25 2014 | | | | | |
| City Chicago | State IL | Zip Code 60606 | Transaction ID : SA17.36876 Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Ye | ar-to-Date ▼ 750.00 | | | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2250.00 | | | | | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the | FOR LINE NUMBER: PAGE 18 OF 113 (check only one) | | | | | |
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| | | Detailed Summary Page | 11a 11b 11c 12 13 14 15 16 X 17 | | | | | |
| Any information copied from such Reports and sor for commercial purposes, other than using the | | | erson for the purpose of soliciting contributions | | | | | |
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILL | INOIS | | | | | | | |
| Full Name (Last, First, Middle Initial) A. NANCY PELOSI FOR CONGRESS | | | Date of Receipt | | | | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 | | | 11 25 _ 2014 _ | | | | | |
| City | State | Zip Code | 11 25 2014 Transaction ID : SA17.36866 | | | | | |
| WASHINGTON | DC | 20005 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C cod | 0213512 | 5000.00 | | | | | |
| Name of Employer | Occupation | | Unlimited transfer | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 5000.00 | | | | | | |
| Full Name (Last, First, Middle Initial) B. NANCY PELOSI FOR CONGRESS | 8 | | Date of Receipt | | | | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 | | | 11 25 2014 | | | | | |
| City | State DC | Zip Code | Transaction ID : SA17.36868 | | | | | |
| WASHINGTON | DC | 20005 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | | 0213512 | 5000.00 Unlimited transfer | | | | | |
| Name of Employer | Occupation | | Offiliffiled transfer | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ | 1 | | | | | |
| | | <u> </u> | | | | | | |
| Full Name (Last, First, Middle Initial) C. NANCY PELOSI FOR CONGRES | SS | | Date of Receipt | | | | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 City | State | Zip Code | 11 25 2014 | | | | | |
| WASHINGTON | DC | 20005 | Transaction ID : SA17.36869 Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C co | 0213512 | 5000.00 | | | | | |
| Name of Employer | Occupation | | Unlimited transfer | | | | | |
| Receipt For: Primary General | Aggregate | Year-to-Date ▼ | | | | | | |
| Other (specify) ▼ | | 15000.00 | | | | | | |
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| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | X) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 19 OF 113 (check only one) 11a 11b 11c 12 13 14 15 16 🗙 17 | | | | | | |
|--|---|---|--|--|--|--|--|--|--|
| or for commercial purposes, other than usin | | | person for the purpose of soliciting contributions e to solicit contributions from such committee. | | | | | | |
| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF | ILLINOIS | | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Niles Township Democrats | | | Date of Receipt | | | | | | |
| Mailing Address 4119 Maion Street | | | 12 15 _ 2014 _ | | | | | | |
| City | State | Zip Code | Transaction ID : SA17.36895 | | | | | | |
| Skokie | IL | 60076 | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | | |
| Receipt For: | Aggregate | Year-to-Date ▼ | | | | | | | |
| Primary General Other (specify) ▼ | | 900.00 | | | | | | | |
| Full Name (Last, First, Middle Initial) B. Patrick Daley Thompson Campa | Full Name (Last, First, Middle Initial) Patrick Daley Thompson Campaign Committee | | | | | | | | |
| Mailing Address 20 S. Clark Street | | | 11 25 2014 | | | | | | |
| City | State | Zip Code | Transaction ID : SA17.36880 | | | | | | |
| Chicago | IL | 60603 | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | | | | | |
| Name of Employer | Occupation | | Voter file | | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 750.00 | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Bassist | | | | | | |
| C. Mailing Address | | | Date of Receipt | | | | | | |
| City | State | Zip Code | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | С | | Amount of Each Fields Fellod | | | | | | |
| Name of Employer | Occupation | | | | | | | | |
| Receipt For: | Aggregate | | | | | | | | |
| Primary General Other (specify) ▼ | | 7 1 7 1 7 1 | | | | | | | |
| SUBTOTAL of Receipts This Page (optional | al) | | 1500.00 | | | | | | |

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| S | CHEDULE B (FEC Form 3X) | | | FOR LINE NUMBER: PAGE 20 | | OF 113 | | | |
|------------|--|-------------|-----------------------------------|--------------------------|-------------|------------|-------------|------------------|-----------|
| IT | EMIZED DISBURSEMENTS | | arate schedule(s) category of the | (check only | | | | | |
| | | | Summary Page | X 21b 27 | 22 28a | 23 28b | 24 28c | $ \frac{25}{29}$ | 26 30b |
| Λ. | ny information copied from such Reports and Statem | ente may | not he sold or us | | | | | | |
| | for commercial purposes, other than using the nam | | | | | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | | | |
| $ \rangle$ | DEMOCRATIC PARTY OF ILLINO | IS | | | | | | | |
| \angle | Full Name (Last, First, Middle Initial) | | | | | | | | |
| Α. | | an Com | mittee | Date o | f Disburse | ement | | | |
| | | | | | M = M | / D | D / Y | YY | Y |
| | Mailing Address 430 South Capitol Street, S.E. #2 | | | | 11 | 2 | 25 | 2014 | |
| | City | State | | | | | | | |
| | Washington | DC | Zip Code 20003 | | Trans | action ID | : SB21B.3 | 7526 | |
| | Purpose of Disbursement In-kind - cover services and equipment | | | | A 100 0 100 | + of Fee! | Diehumaam | ء الحالم الحصوم | Dovic - |
| | Candidate Name | | | | Amoun | ι οι ⊏ach | Disbursem | eni inis | renoa |
| | | | | Category/ Type | | | | 787 | 7.07 |
| | Office Sought: House Disbursen | nent For: | | | | | | | |
| | | Primary | General | | | | | | |
| | President State: District: | Other (spe | city) 🔻 | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | | |
| В. | HOYER FOR CONGRESS | | | | Date o | f Disburse | ement | | |
| | | | | | М = М | / D | | ΥΥ | Y |
| | Mailing Address 700 13TH STREET, NW SUITE 600 | | | | 11 | 2 | 25 | 2014 | |
| | · · | State DC | Zip Code 20005 | | Trans | saction ID | : SB21B.3 | 7532 | |
| | Purpose of Disbursement | | 20000 | | | | | | |
| | In-kind - Travel | | | | Amoun | t of Each | Disbursem | ent this | Period |
| | Candidate Name | | | 2247.91 | | | | | |
| | Office Sought: House Disbursem | nent For: | | Туре | | 7 | , | | |
| | | Primary | General | | | | | | |
| | | Other (spec | cify) 🔻 | | | | | | |
| _ | State: District: | | | | | | | | |
| C | Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS | | | | Date o | f Disburse | ement | | |
| ٠. | | | | | M M | / D | | ΥΥ | Y |
| | Mailing Address 700 13TH STREET, NW SUITE 600 | | | | 11 | | 25 | 2014 | |
| | City | State | Zip Code | | Trans | saction In |) : SB21B.3 | 7534 | |
| | WASHINGTON Purpose of Disbursement | DC | 20005 | | | | | | |
| | In-kind - Travel | | | | Amoun | t of Fach | Disbursem | ent this | Period |
| | Candidate Name | | | Category/ Type | | | 7.22 | | |
| | Office Sought: House Disbursen | nent For: | | | | 7 | 7 | | |
| | | Primary | General | | | | | | |
| | President State: District: | Other (spe | city) 🔻 | | | | | | |
| г | otate. District. | | | | | | | | |
| 5 | SUBTOTAL of Disbursements This Page (optional) | | | | | | - 40 | 10262 | 2.20 |
| \vdash | · | | | | | | | | |
| 1 | TOTAL This Period (last page this line number only). | | | | | - | | | |

| SCHEDULE B (FEC Form 3X) | | FOR LINE | NUMBER: PAGE 21 OF 113 |
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| TEMIZED DISBURSEMENTS | Use separate schedule(s for each category of the | (check only | one) |
| | Detailed Summary Page | | |
| Any information conicd from such Deposits and Clate | monto mov not be said as : | | Date of Disbursement Date of Disbursement Transaction ID: SB21B.37528 Amount of Each Disbursement this Period Transaction ID: SB21B.37530 Amount of Each Disbursement this Period Transaction ID: SB21B.37530 Date of Disbursement this Period Transaction ID: SB21B.37530 Amount of Each Disbursement this Period 12 01 2014 |
| or for commercial purposes, other than using the nar | | | |
| NAME OF COMMITTEE (In Full) | | | |
| angle DEMOCRATIC PARTY OF ILLING | DIS | | |
| Full Name (Last, First, Middle Initial) | | | |
| A. NANCY PELOSI FOR CONGRES | S | | Date of Disbursement |
| Na Para Addison Top (CT) CTDTT NA | | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 | | | 12 01 2014 |
| | State Zip Code | | Transaction ID ODOAD OTFO |
| WASHINGTON | DC 20005 | | Transaction ID: SB21B.37528 |
| Purpose of Disbursement In-kind - Travel | | | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | |
| | | Туре | 722.20 |
| Office Sought: House Disburse Senate | ment For: Primary General | | |
| President | Other (specify) | | |
| State: District: | • · · · · · · · · · · · · · · · · · · · | | |
| Full Name (Last, First, Middle Initial) | | | |
| 3. NANCY PELOSI FOR CONGRES | S | | |
| Mailing Address 700 13TH STREET, NW SUITE 600 | | | |
| City WASHINGTON | State Zip Code DC 20005 | | Transaction ID : SB21B.37530 |
| Purpose of Disbursement In-kind - Travel | | · · · · | Amount of Each Disbursement this Period |
| Candidate Name | | Category/ | 470.00 |
| Carraratio Trainio | | | |
| | | Type | 176.03 |
| Office Sought: House Disburse | ment For: | | 176.03 |
| Office Sought: House Disburse Senate | Primary General | | 176.03 |
| Office Sought: House Disburse | | | 176.03 |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) | Primary General | | 176.03 |
| Office Sought: House Disburse Senate President State: District: | Primary General | | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) | Primary General | | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address | Primary General | | Date of Disbursement |
| Office Sought: House Disburse | Primary General | | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address | Primary General Other (specify) ▼ | | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City | Primary General Other (specify) ▼ | Type Category/ | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name | Primary General Other (specify) ▼ | Type | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name | Primary General Other (specify) ▼ State Zip Code | Type Category/ | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Disburse | Primary General Other (specify) ▼ State Zip Code ment For: | Type Category/ | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate Disburse Disburse | Primary General Other (specify) ▼ State Zip Code ment For: Primary General | Type Category/ | Date of Disbursement |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: | Primary General Other (specify) ▼ State Zip Code ment For: Primary General Other (specify) ▼ | Category/ Type | Date of Disbursement M M M / D D / Y Y Y Y Y Amount of Each Disbursement this Period |
| Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President Disburse | Primary General Other (specify) ▼ State Zip Code ment For: Primary General Other (specify) ▼ | Category/ Type | Date of Disbursement |

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| S | CHEDULE B (FEC Form 3X) | | | FOR LINE I | NUMBER: | | PAGE | 22 | OF 113 | | |
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| IT | EMIZED DISBURSEMENTS | Use separate schedu for each category of | | (check only | | | | | | | |
| | | Detailed Summary Pa | | 21b 27 | 22 28a | 23 28b | 24 28c | 25 29 | 26 30b | | |
| | information and from such Bounds and Older | | | | | | | | | | |
| | ny information copied from such Reports and Statem for commercial purposes, other than using the name | | | | | | | | | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | | | |
| $ \rangle$ | DEMOCRATIC PARTY OF ILLINO | IS | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | | |
| Α. | Amtrak | | | | Date of I | | | | | | |
| | Mailing Address Union Station-W.Washington Street | t | | | 12 | 03 | | 2014 | Y | | |
| | City | State Zip Code | Transa | stion ID : | SB30B.36 | 024 | | | | | |
| | Springfield | IL 62704 | | | Halisa | | 36306.30 | 1334 | | | |
| | Purpose of Disbursement Travel | | | | Amount of | of Each [| Disburseme | ent this | Period | | |
| | Candidate Name | | _ " | Category/ | | | | 8 | 4.00 | | |
| | Office Sought: House Disbursen | aont For: | | Туре | | 7 | 7 | | | | |
| | | Primary Gener | ral | | [MEMO I | TEM] | | | | | |
| | | Other (specify) ▼ | | | | | | | | | |
| | State: District: | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | | |
| В. | Expedia Services | | | | Date of I | Disbursen | | | | | |
| | Mailing Address 3150 139th Avenue | | | | 10 | 20 | | 2014 | Y | | |
| | City | State Zip Code | | | | | | Transaction ID : SB30B.36971 | | | |
| | • | WA 98005 | | | Transa | ction ID : | SB30B.36 | 5971 | | | |
| | Purpose of Disbursement Travel | | П | | Amount o | of Fach [| Disburseme | ent this | Period | | |
| | Candidate Name | | Category/ | | | Amount of Each Disbursement this Period | | | | | |
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| | | Other (enecify) Gener | ral | | | | | | | | |
| | State: District: | Other (specify) ▼ | | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | | | | |
| C. | Illinois Department of Revenue | | | | Date of I | Disbursen | nent | | | | |
| | Mailing Address Department of Revenue | | | | м = м 12 | / D 11 | | 2014 | Y | | |
| | | | | | | | | 2011 | | | |
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| | Springfield Purpose of Disbursement | IL 62704 | | | | | | | | | |
| | Payroll Taxes | | | | Amount of | of Each [| Disburseme | ent this | Period | | |
| | Candidate Name | | | Category/ Type | | | | 27: | 3.96 | | |
| | Office Sought: House Disbursen | nent For: | | | | | | | | | |
| | | Primary Gener | ral | | | | | | | | |
| | State: President State: | Other (specify) | | | | | | | | | |
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| SCHEDULE B (FEC Form 3X) FOR LINE | | | NUMBER: PAGE 23 OF 113 | | | |
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| $ \; angle$ DEMOCRATIC PARTY OF ILLINO | S | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| A. Illinois Department of Revenue | | | Date of Disbursem | ent | | |
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| Mailing Address Department of Revenue | | | 12 30 | 2014 | | |
| City | tate Zip Code | | Turner of the ID | OD00D 00000 | | |
| Springfield | IL 62704 | | Transaction ID : | SB30B.36992 | | |
| Purpose of Disbursement Payroll Taxes | | | Amount of Each D | isbursement this Period | | |
| Candidate Name | I | Category/ | 763 5 245 2 | | | |
| | | Type | | 93.75 | | |
| Office Sought: House Disbursem | | | | | | |
| | Primary General Other (specify) The second of the control of t | | | | | |
| State: District: | other (specify) | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| B. Illinois State Board of Elections | | | Date of Disbursem | ent | | |
| Mailing Address 2000 O.M. A.d. | | | M = M / D = D | / | | |
| Mailing Address 2329 S. MacArthur | | | 12 03 | 2014 | | |
| | tate Zip Code | | Transaction ID : | SB30B.36928 | | |
| Springfield Purpose of Disbursement | IL 62704 | | | | | |
| Voter file | | | Amount of Each D | isbursement this Period | | |
| Candidate Name | | Category/ | | 500.00 | | |
| 0": 0 | | Type | | 500.00 | | |
| Office Sought: House Disbursem | ent For: Primary General | | | | | |
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| State: District: | · · · · · · · · · · · · · · · · · · · | | | | | |
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| C. Internal Revenue Service | | | Date of Disbursem | _ | | |
| Mailing Address Department of the Treasury | | | 11 28 | 2014 | | |
| | | | | | | |
| , | tate Zip Code MO 64999 | | Transaction ID: | SB30B.36922 | | |
| Purpose of Disbursement | 04000 | | | | | |
| Payroll Taxes | | | Amount of Each D | isbursement this Period | | |
| Candidate Name | | Category/ | | 1815.96 | | |
| Office Sought: House Disbursem | ent For: | Туре | | | | |
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| _ | Full Name (Last, First, Middle Initial) | | | | | |
| Α. | Internal Revenue Service | | | | Date of Dis | sbursement |
| | Mailing Address Department of the Treasury | | | | 12 / | 11 2014 |
| | Mailing Address Department of the Treasury | | | | 12 | 11 2014 |
| | City | State Zip Code | | | Tananan | ion ID - CD20D 20000 |
| | Kansas City | MO 64999 | | | Transact | ion ID : SB30B.36966 |
| | Purpose of Disbursement Payroll Taxes | | Шr | | A a | Fook Diskussesses this Deviced |
| | Candidate Name | | L | | Amount of | Each Disbursement this Period |
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| В. | Internal Revenue Service | | | | | sbursement |
| | Mailing Address Department of the Treasury | | | | 12 | 30 2014 |
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| | , | State Zip Code | | | Transact | ion ID : SB30B.36991 |
| | Kansas City Purpose of Disbursement | MO 64999 | | | | |
| | Payroll Taxes | | | | Amount of | Each Disbursement this Period |
| | Candidate Name | | | Category/ | | |
| | | | | Type | | 559.54 |
| | Office Sought: House Disbursen | | | | | |
| | | Primary Gene | ral | | | |
| | President State: District: | Other (specify) ▼ | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | |
| C. | Elizabeth Jung | | | | Date of Dis | sbursement |
| | | | | | M = M / | D D / Y Y Y Y |
| | Mailing Address 25 Kassebaum Lane | | | | 12 | 03 2014 |
| | Cit. | State Zip Code | | | | |
| | , | MO 63129 | | | Transact | ion ID : SB30B.36929 |
| | Purpose of Disbursement | | | | | |
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| | Candidate Name | | | Category/ | | 61.79 |
| | Office Sought: House Disbursen | ant For | | Туре | | 7 |
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| | President | Other (specify) | i di | | | |
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| | DEMOCRATION ARTHUR IEEERO | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| Α. | Kenneth Kimber | | | | Date of D | isbursement | |
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| | Maining Address 2217 Boysenberry Lane | | | | | 20 2014 | |
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| | Springfield | IL | 62711 | | Transac | tion ID : SB30B.36917 | |
| | Purpose of Disbursement Wages | | | | A | Fook Diskursers at this Deviced | |
| | Candidate Name | | | | Amount of | f Each Disbursement this Period | |
| | Canada Hamo | | | Category/ Type | | 1274.22 | |
| | Office Sought: House Disbursen | nent For: | | .,,,, | | | |
| | Senate | Primary | General | | | | |
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| _ | State: District: | | | | | | |
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| О. | Kenneth Kimber | | | | | isbursement | |
| | Mailing Address 2217 Boysenberry Lane | | | | 11 | 28 2014 | |
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| | Springfield Purpose of Disbursement | IL | 62711 | | | | |
| | Insurance | | | | Amount of | Each Disbursement this Period | |
| | Candidate Name | | | Category/ | - | | |
| | | | | Type | | 312.81 | |
| | Office Sought: House Disbursen | nent For: | | | | | |
| | | Primary | General | | | | |
| | President State: District: | Other (spec | city) 🔻 | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| C. | Kenneth Kimber | | | | Date of D | isbursement | |
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| | Mailing Address 2217 Boysenberry Lane | | | | 12 | 03 2014 | |
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| | Candidate Name | | | Category/ | | 134.00 | |
| | Office Cought: House | ant Fair | | Туре | | 134.00 | |
| | Office Sought: House Disbursen Senate | nent For: Primary | General | | | | |
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| | State: District: | , | <i>→</i> | | | | |
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| TI LIVIIZED DISDUNSLIVIEN IS | | for each category of the Detailed Summary Page | e | 21b | 22 23 24 25 | | | |
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| \angle | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | B (B) . | | | |
| A. | Kenneth Kimber | | | | Date of Disbursement | | | |
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| | Mailing Address 2217 Boysenberry Lane | | | | 12 11 2014 | | | |
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| | Springfield | IL 62711 | | | Transaction ID : SB30B.36949 | | | |
| | Purpose of Disbursement | | | | 1 | | | |
| | Wages | | | | Amount of Each Disbursement this Period | | | |
| | Candidate Name | | С | ategory/ | 1274.23 | | | |
| | Office Cought | | | Туре | 1217.20 | | | |
| | Office Sought: House Disburser Senate | | | | | | | |
| | President | Primary General Other (specify) ▼ | | | | | | |
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| _ | Full Name (Last, First, Middle Initial) | | | | | | | |
| В. | Kenneth Kimber | | | | Date of Disbursement | | | |
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| | Mailing Address 2217 Boysenberry Lane | | | | 12 30 2014 | | | |
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| | Springfield Purpose of Disbursement | IL 62711 | | | _ | | | |
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| | Candidate Name | | | | S | | | |
| | | | | ategory/ Type | 1365.15 | | | |
| | Office Sought: House Disburser | ment For: | | 71: - | | | | |
| | Senate | Primary General | | | | | | |
| | President | Other (specify) ▼ | | | | | | |
| _ | State: District: | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | |
| C. | Kenneth Kimber | | | | Date of Disbursement | | | |
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| | Mailing Address 2217 Boysenberry Lane | | | | 12 30 2014 | | | |
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| | Springfield | IL 62711 | | | Transaction ID : SB30B.36990 | | | |
| | Purpose of Disbursement | | T | | - | | | |
| | Insurance | | | | Amount of Each Disbursement this Period | | | |
| | Candidate Name | | С | ategory/ | 242.04 | | | |
| | | | | Type | 312.81 | | | |
| | Office Sought: House Disburser | | | | | | | |
| | Senate | Primary General | | | | | | |
| | State: President State: | Other (specify) ▼ | | | | | | |
| | otate. District. | | | | | | | |
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| | DEMOCIONIO I ARTI OI ILLINO | .0 | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| Α. | Kenneth Kimber | | | | Date of D | isbursement | |
| | Mailing Address 2217 Boysenberry Lane | | | | 12 | 30 2014 | |
| | Mailing Address 2217 Boysenberry Lane | | | | 12 | 30 2014 | |
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| | Purpose of Disbursement Wages | | | | A | f Fack Diskursement this Device | |
| | Candidate Name | | | | Amount o | f Each Disbursement this Period | |
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| | Senate | Primary | General | | | | |
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| _ | State: District: | | | | | | |
| В. | Full Name (Last, First, Middle Initial) | | | | Data of D | visbursement | |
| υ. | Ben Lenet | | | | M M | | |
| | Mailing Address 1547 W. Blackhawk Avenue | | | 11 | 28 2014 | | |
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| | | State | Zip Code | | Transac | etion ID : SB30B.36918 | |
| | Chicago Purpose of Disbursement | IL | 60642 | | | | |
| | Wages | | | | Amount o | f Each Disbursement this Period | |
| | Candidate Name | | | Category/ | | | |
| | | | | Type | | 2534.22 | |
| | Office Sought: House Disbursen | | | | | | |
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| | Mailing Address 1547 W. Blackhawk Avenue | | | | 12 | 11 2014 | |
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| | Chicago | IL | 60642 | | Transac | tion ID : SB30B.36950 | |
| | Purpose of Disbursement | | | | | | |
| | Wages | | | | Amount o | f Each Disbursement this Period | |
| | Candidate Name | | | Category/ | | 2534.21 | |
| | Office Sought: House Disbursen | nent For | | Туре | | 7 | |
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|]/ | DEMOCRATIC PARTY OF ILLINO | ois | | | | | | | |
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| | City Schicago | State Zip Code IL 60642 | | | Transact | ion ID : | SB30B | .36953 | |
| | Purpose of Disbursement | 100042 | | | | | | | |
| | Insurance | | | | Amount of | Each D | Disburse | ment this | s Period |
| | Candidate Name | | 7 | Category/ | | | | | 00.00 |
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| | Office Sought: House Disburser | | | | | | | | |
| | Senate | Primary Gener | ral | | | | | | |
| | President State: District: | Other (specify) ▼ | | | | | | | |
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| В. | Full Name (Last, First, Middle Initial) MailChip | | | | Date of Dis | sbursen | nent | | |
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| | Mailing Address 512 Means Street | | | | 11 | 29 | | 2014 | |
| | | | | | | | | | |
| | | State Zip Code | | | Transact | ion ID : | SB30B | .36936 | |
| | Atlanta Purpose of Disbursement | GA 30318 | | | | | | | |
| | Email | | | | Amount of | Each D | Disburse | ment this | s Period |
| | Candidate Name | | - 1 | Category/ | | - | | | |
| | | | | Type | | , | - 7 | | 50.00 |
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| | President | Other (specify) ▼ | | | | | | | |
| _ | State: District: | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | Date of Dis | churcon | nant | | |
| Ο. | Christopher Maley | | | | | | _ | / Y Y | V |
| | Mailing Address 2517 W. Harbauer Lane | | | | 12 | 03 | | 2014 | - Y |
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| | • | State Zip Code | | | Transact | ion ID : | SB30B | .36939 | |
| | Springfield Purpose of Disbursement | IL 62702 | | | | • | | | |
| | Wages | | | | Amount of | Fach 5 | Nahi | mant this | Dorie - |
| | Candidate Name | | | Catagony | Amount of | Each L | Jisburse | ment this | s Period |
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| $ \rangle$ | DEMOCRATIC PARTY OF ILLINO | IS | | | | | |
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| | Mailing Address 24082 Network Place | | | | 12 | | 2014 |
| | City | State | Zip Code | | T | nastic:: ID | . CD20D 26077 |
| | Chicago | IL | 60673 | | Irans | saction ID | : SB30B.36977 |
| | Purpose of Disbursement Voter File Training | | | | A | | Dialous and state B. 1.1. |
| | Candidate Name | | | | Amoun | t of Each | Disbursement this Period |
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| | President | Other (spe | cify) 🔻 | | | | |
| | State: District: | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | _ | | |
| В. | Russell Nagel | | | | Date o | f Disburse | |
| | Mailing Address 529 S. Glenwood Avenue | | | | 12 | |)3 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | 529 S. Gienwood Avenue | | | | 12 | | 2014 |
| | City | State | Zip Code | | Trans | saction ID |) : SB30B.36940 |
| | Springfield | IL | 62704 | | lians | saction ID | , |
| | Purpose of Disbursement Wages | | | | Amoun | t of Each | Disbursement this Period |
| | Candidate Name | | | | Alliouli | i oi Eacil | Dispuisement this Fellog |
| | | | | Category/ Type | | | 6728.33 |
| | Office Sought: House Disbursen | nent For: | | - 7,60 | - | | , |
| | | Primary | General | | | | |
| | | Other (spe | cify) 🔻 | | | | |
| _ | State: District: | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | Dete | 4 Dial | |
| Ú. | Amanda Taylor | | | | | f Disburse | |
| | Mailing Address 1825 Florida | | | | 12 | | 2 2014 |
| | | | | | | | |
| | , | State | Zip Code | | Trans | saction ID | : SB30B.36970 |
| | Washington Purpose of Disbursement | DC | 20009 | | | | |
| | See Expendia memo | | | | A | | Disharasan and data But 1 |
| | Candidate Name | | | Onto a said | Amoun | t of Each | Disbursement this Period |
| | | | | Category/ Type | | | 429.70 |
| | Office Sought: House Disbursen | nent For: | | | | | 7 |
| | Senate | Primary | General | | | | |
| | | Other (spe | cify) 🔻 | | | | |
| | State: District: | | | | | | |
| | | | | | | | 11658.03 |
| L | UBTOTAL of Disbursements This Page (optional) | | | ·····• | | - 1 | 11030.03 |
| ۱, | OTAL This Period (last page this line number only) | | | | | | |
| 1 ' | VIAL THIS I CHOW (last page this line number only) | | | | | 7 | |

| SCHEDULE B (FEC Form 3X) | | FOD LIVE | PAGE 30 OF 113 | | | |
|--|-----------------------------------|--------------|---|--|--|--|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) | (check only | THOMBETT. | | | |
| I I EINITEN NISDOUSEINIEN IS | for each category of the | 21b | 22 23 24 25 26 | | | |
| | Detailed Summary Page | 27 | 28a 28b 28c 29 X 30 | | | |
| Any information copied from such Reports and Stat | ements may not be sold or use | hv anv nered | | | | |
| or for commercial purposes, other than using the n | | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | | |
| DEMOCRATIC PARTY OF ILLIN | OIS | | | | | |
| | 0.0 | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| ^{A.} UPS Store | | | Date of Disbursement | | | |
| Mailing Address T | | | M M / D D / Y Y Y Y Y | | | |
| Mailing Address Tesson Ferry Road | | | 12 03 2014 | | | |
| City | State Zip Code | | | | | |
| Saint Louis | MO 63128 | | Transaction ID : SB30B.36930 | | | |
| Purpose of Disbursement | | | | | | |
| Printer Return Packaging | | [] | Amount of Each Disbursement this Period | | | |
| Candidate Name | | Category/ | 61.79 | | | |
| 0(5 0 | | Type | 01.79 | | | |
| | ement For: | | [MEMO ITEM] | | | |
| Senate President | Primary General Other (specify) ▼ | | | | | |
| State: District: | □ Other (Specify) ▼ | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| 3. | | | Date of Disbursement | | | |
| | | | M M / D D / Y Y Y Y | | | |
| Mailing Address | | | | | | |
| | | | | | | |
| City | State Zip Code | | | | | |
| Purpose of Disbursement | | | | | | |
| | | | Amount of Each Disbursement this Period | | | |
| Candidate Name | | Category/ | | | | |
| | | Type | | | | |
| Office Sought: House Disburs | ement For: | | | | | |
| Senate | Primary General | | | | | |
| President | Other (specify) | | | | | |
| State: District: | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Dieburgoment | | | |
| C. | | | Date of Disbursement | | | |
| Mailing Address | | | M = M / D = D / Y = Y = Y | | | |
| Maining / Mail 000 | | | | | | |
| City | State Zip Code | | | | | |
| | | | | | | |
| Purpose of Disbursement | | | | | | |
| Candidata Nama | | | Amount of Each Disbursement this Period | | | |
| Candidate Name | | Category/ | | | | |
| Office Sought: House Disburs | ement For: | Туре | 7 7 7 | | | |
| Senate | Primary General | | | | | |
| President | Other (specify) | | | | | |
| State: District: | | | | | | |
| | | | | | | |
| SUBTOTAL of Disbursements This Page (optional | | | 0.00 | | | |
| | | | | | | |
| TOTAL This Period (last page this line number on | w) | | 37107.35 | | | |

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

| PAGE | 31 | OF | = | 113 | |
|-------|------|------|------|-----|----|
| FOR L | NF 1 | 8a (| OF F | ORM | 3X |

| NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS | | | | | | | |
|--|---|---|--|--|--|--|--|
| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED | | | | | |
| DEMOCRATIC PARTY OF ILLINOIS | 12 12 2014 | 3387.60 | | | | | |
| BREAKDOWN OF TRANSFER RECEIVED | | | | | | | |
| i) Total Administrative | | 0.00 | | | | | |
| | | Transaction ID: H3.36901 | | | | | |
| ii) Generic Voter Drive | | | | | | | |
| iii) Exempt Activities | | | | | | | |
| iv) Direct Fundraising (List Activity or Event Ide | ontifier) | | | | | | |
| bried Fundraising (List Activity of Event for | entiner) | | | | | | |
| a) 2014 Fall Event 09-23-14 (09/23/2014) | 3387.60 | 1 | | | | | |
| | Transaction ID : H3.36901.0 | - | | | | | |
| b) | | | | | | | |
| | , | | | | | | |
| c) Total Amount Transferred For Direct Fund | raising | 3387.60 | | | | | |
| v) Direct Candidate Support (List Activity or E | vent Identifier) | | | | | | |
| t) broot carraians capport (List / tolling of L | | | | | | | |
| a) | | | | | | | |
| | | - | | | | | |
| b) | - | | | | | | |
| | , | | | | | | |
| c) Total Amount Transferred For Direct Cand | idate Support | , | | | | | |
| | | | | | | | |
| vi) Public Communications Referring Only to | Party (Made by PAC) | | | | | | |
| TOTALS F | OR BREAKDOWN OF TRANSFER RECEIVE | ED | | | | | |
| | | | | | | | |
| TOTAL This Period (Administrative) | | | | | | | |
| | | | | | | | |
| TOTAL This Period (Generic Voter Drive) | | | | | | | |
| TOTAL This Build (Farmer Ashiritar) | | | | | | | |
| TOTAL This Period (Exempt Activities) | | | | | | | |
| TOTAL This Period (Direct Fundraising) | | | | | | | |
| TOTAL THIS T CHOO (Block T dildraising) | | , | | | | | |
| TOTAL This Period (Direct Candidate Support) | | | | | | | |
| Сопределения (Становый соверног) | | | | | | | |
| TOTAL This Period (Public Communications Referring | g Only to Party) | | | | | | |
| • | | | | | | | |
| TOTAL This Period (Total Amount Transferred) | | | | | | | |

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

| PAGE | 32 | OF | 113 | |
|--------|------|-------|------|----|
| FOR LI | NF 1 | 8a OF | FORM | зх |

| | OF COMMITTEE (In Full) RATIC PARTY OF ILLINOIS | | · |
|-------|---|---|--------------------------|
| NAM | E OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
| DEM | OCRATIC PARTY OF ILLINOIS | 12 / 22 / 2014 | 61109.27 |
| BRE | AKDOWN OF TRANSFER RECEIVED | | |
| i) | Total Administrative | | 61109.27 |
| | | | Transaction ID: H3.36900 |
| ii) | Generic Voter Drive | | |
| | | | |
| iii) | Exempt Activities | | |
| iv) | Direct Fundraising (List Activity or Event Iden | itifier) | |
| | a) | | |
| | | | |
| | b) | | |
| | | , | |
| | c) Total Amount Transferred For Direct Fundra | sing | |
| v) | Direct Candidate Support (List Activity or Eve | ent Identifier) | |
| | a) | |] |
| | | | |
| | b) | | |
| | | | , |
| | c) Total Amount Transferred For Direct Candid | ate Support | |
| | | | |
| vi) | Public Communications Referring Only to F | Party (Made by PAC) | |
| | TOTALS FO | R BREAKDOWN OF TRANSFER RECEIVE | D |
| TOTAL | This Period (Administrative) | | 61109.27 |
| TOTAL | This Period (Generic Voter Drive) | | 0.00 |
| TOTAL | This Period (Exempt Activities) | | 0.00 |
| TOTAL | This Period (Direct Fundraising) | | 3387.60 |
| TOTAL | This Period (Direct Candidate Support) | | 0.00 |
| TOTAL | This Period (Public Communications Referring | Only to Party) | 0.00 |
| TOTAL | This Period (Total Amount Transferred) | | 64496.87 |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 33 | OF | 113 | |
|--------|------|-------|--------|---|
| FOR LI | NE 2 | 1a OF | FORM 3 | X |

| | | | | | I OIT LINE ZIA OI T | OT HIVE O |
|----|---|------------------|---------------------------------|-------------------|---|-------------------|
| | ME OF COMMITTEE (In Full) EMOCRATIC PARTY OF ILLII | NOIS | | | | |
| | | | ID 114 00004 | | Allocated Activity or Event: | |
| Α. | Full Name (Last, First, Middle Initial) Transaction ID: H4.36924 Powerplay Properties | | | | | Exempt |
| | Mailing Address 1201 Veterans Parkway | | | | Voter Drive Direct Candidate S | Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by F | PAC |
| | Springfield Purpose of Disbursement: | IL | 62707 | | Allocated Activity or Event Year-To-Date | ; |
| | Rent | | | | 437046.36 | |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 11 25 2014 | Y Y |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| | 58.50 | | , , , | 220.06 | 278.56 | |
| В. | Full Name (Last, First, Middle Initial) | Transactio | n ID : H4.36913 | | Allocated Activity or Event: | |
| | TTI National Mailing Address P.O. Box 96003 | | | | Administrative Fundraising | Exempt |
| | Walling Address P.O. Box 96003 | | | | Voter Drive Direct Candidate S | Support |
| | City Charlotte | State NC | Zip Code 28296-000 | 2 | Public Comm (ref to party only) by F | |
| | Purpose of Disbursement: | INC . | 20290-000 | ა | Allocated Activity or Event Year-To-Date |) |
| | Telephone | | | | 437065.33 | |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 11 26 2014 | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| | 3.98 | | 7 7 | 14.99 | 18.97 | |
| C. | Full Name (Last, First, Middle Initial) | Transactio | on ID : H4.36914 | | Allocated Activity or Event: | |
| | TTI National Mailing Address P.O. Box 96003 | | | | Administrative Fundraising Voter Drive Direct Candidate 9 | Exempt Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by F | |
| | Charlotte | NC | 28296-000 | 3 | Allocated Activity or Event Year-To-Date | |
| | Purpose of Disbursement: Telephone | | | | 437113.67 | п. |
| | Activity or Event Identifier: | | | | | |
| | Administrative | | | Category/ Type | Date 11 26 2014 | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| | 10.15 | | , , , | 38.19 | 48.34 | |
| SL | JBTOTAL of Allocated Federal and NonFeder | eral Activity Th | nis Page | | | |
| | FEDERAL SHARE | _+ | NONFEDERAL | SHARE | = TOTAL AMOUNT | _ |
| | 72.63 | _ L. | | 273.24 | 345.8 | 7 |
| TC | OTAL This Period (last page for each line or FEDERAL SHARE | nly)(Federal sh | nare to 21(a)(i) and NONFEDERAL | | are to 21(a)(ii)) TOTAL AMOUNT | |
| | | 7 | | | 1 | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 34 | OF | 113 | |
|-------|------|-------|------|----|
| FOR L | NE 2 | 1a OF | FORM | 3X |

NAME OF COMMITTEE (In Full)

| D | EMOCRATIC PARTY OF ILLIN | NOIS | | | |
|------------|--|-------------|---------------------------------|--|--|
| A. | Full Name (Last, First, Middle Initial) | Transactio | on ID : H4.36915 | | Allocated Activity or Event: |
| | Kenny and Kenny, P.C. | | | | Administrative Fundraising Exempt |
| | Mailing Address 1400 W. 47th Street | | | | Voter Drive Direct Candidate Support |
| | City La Grange | State IL | Zip Code 60525 | | Public Comm (ref to party only) by PAC |
| | Purpose of Disbursement: | | 33323 | | Allocated Activity or Event Year-To-Date |
| | Bookkeeping Service Activity or Event Identifier: | | | | 442671.17 |
| | Administrative | | | Category/ Type | Date 11 26 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 1167.08 | | 7 | 4390.42 | 5557.50 |
| В. | Full Name (Last, First, Middle Initial) | Transactio | n ID : H4.36916 | | Allocated Activity or Event: |
| | Powerplay Properties | | | | Administrative Fundraising Exempt |
| | Mailing Address 1201 Veterans Parkway | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Springfield Purpose of Disbursement: | IL | 62707 | | Allocated Activity or Event Year-To-Date |
| | Rent | | | 442949.73 | |
| | Activity or Event Identifier: Administrative | | Category/ | M = M / D = D / Y = Y = Y | |
| | | | | Type | Date 11 26 2014 |
| | | | | | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | FEDERAL SHARE 58.50 | · | NONFEDERAL | SHARE 220.06 | = TOTAL AMOUNT 278.56 |
| C. | 58.50 Full Name (Last, First, Middle Initial) | | NONFEDERAL | | 278.56 Allocated Activity or Event: |
| <u></u> | Full Name (Last, First, Middle Initial) Citi Cards | | | | 278.56 |
| <u>c</u> . | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 | Transactio | on ID : H4.36996 | | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support |
| c. | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City | Transactio | on ID : H4.36996 Zip Code | | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC |
| c. | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: | Transactio | on ID : H4.36996 | | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date |
| c. | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow | Transactio | on ID : H4.36996 Zip Code | | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC |
| c. | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: | Transactio | on ID : H4.36996 Zip Code | | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date |
| C. | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: | Transactio | on ID : H4.36996 Zip Code | 220.06 Category/ Type | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 |
| C. | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: Administrative | State IA | Zip Code 50363 | 220.06 Category/ Type | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 Date 11 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: Administrative FEDERAL SHARE 416.20 | State IA + | Zip Code 50363 | Category/ Type | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 Date 11 26 2014 TOTAL AMOUNT |
| | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: Administrative | State IA + | Zip Code 50363 | Category/ Type SHARE | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 Date 11 26 2014 TOTAL AMOUNT |
| | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: Administrative FEDERAL SHARE 416.20 JBTOTAL of Allocated Federal and NonFede | State IA + | zip Code 50363 NONFEDERAL | Category/ Type SHARE | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 Date 11 26 2014 TOTAL AMOUNT |
| sı | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: Administrative FEDERAL SHARE 416.20 JBTOTAL of Allocated Federal and NonFeder | State IA + | Zip Code 50363 NONFEDERAL | 220.06 Category/ Type SHARE 1565.71 SHARE 6176.19 | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 Date 11 26 / 2014 TOTAL AMOUNT 1981.91 |
| sı | Full Name (Last, First, Middle Initial) Citi Cards Mailing Address Processing Center P.O. Box 688901 City Des Moines Purpose of Disbursement: Memo items to follow Activity or Event Identifier: Administrative FEDERAL SHARE 416.20 JBTOTAL of Allocated Federal and NonFede FEDERAL SHARE | State IA + | Zip Code 50363 NONFEDERAL | Category/ Type SHARE 1565.71 SHARE 6176.19 | Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 444931.64 Date 11 26 / 2014 TOTAL AMOUNT 1981.91 |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 35 | OF | 113 | |
|--------|------|-------|------|----|
| FOR LI | NE 2 | 1a OF | FORM | ЗХ |

| NAME OF COMMITTEE (In Full) | | | | FOR LINE 21a OF FORM 3 | |
|--|---------------------------|---|-------------------|---|--|
| DEMOCRATIC PARTY | OF ILLINOIS | | | | |
| A. Full Name (Last, First, Middle In Sarah Nelson | itial) Transaction | n ID : H4.36919 | | Allocated Activity or Event: X Administrative Fundraising Exempt | |
| Mailing Address 655 W. Irving P | ark Road | Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC | | | |
| Apt. 5015 City | | | | | |
| Chicago | IL | 60613 | | - Allocated Activity or Event Year-To-Date | |
| Purpose of Disbursement: Wages spent < 25% on fea | | | | 445175.61 | |
| Activity or Event Identifier: | | | | , | |
| Administrative | | | Category/ Type | Date 11 28 2014 | |
| FEDERAL SHAR | E + | NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| | 51.23 | , , | 192.74 | 243.97 | |
| B. Full Name (Last, First, Middle In | itial) Transaction | n ID : H4.36920 | | Allocated Activity or Event: | |
| Emily Wurth | | | | Administrative Fundraising Exempt | |
| Mailing Address 2267 Boysenbe | rry Lane | | | Voter Drive Direct Candidate Support | |
| City | State | Zip Code | | Public Comm (ref to party only) by PAC | |
| Springfield Purpose of Disbursement: | IL | 62711 | | Allocated Activity or Event Year-To-Date | |
| Wages spent < 25% on fea | | | | 445502.54 | |
| Activity or Event Identifier: Administrative | | | Category/ Type | Date 11 28 2014 | |
| FEDERAL SHAR | E + | NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| | 68.66 | 7 | 258.27 | 326.93 | |
| C. Full Name (Last, First, Middle In ADP | itial) Transaction | n ID : H4.36926 | | Allocated Activity or Event: X Administrative Fundraising Exempt | |
| Mailing Address P.O. Box 84285 | 4 | | | Voter Drive Direct Candidate Support | |
| City | State | Zip Code | | Public Comm (ref to party only) by PAC | |
| Boston Purpose of Disbursement: | MA | 02284 | | Allocated Activity or Event Year-To-Date | |
| Payroll fee | | | | 445792.69 | |
| Activity or Event Identifier: Administrative | | | Category/ Type | Date 11 28 2014 | |
| FEDERAL SHAR | E + | NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| 7 | 60.93 | 7 | 229.22 | 290.15 | |
| SUBTOTAL of Allocated Federal an FEDERAL SHARE | • | is Page NONFEDERAL | SHARE | = TOTAL AMOUNT | |
| | 180.82 | | 680.23 | 861.05 | |
| TOTAL This Period (last page for ea | ach line only)(Federal sh | are to 21(a)(i) and | l NonFederal sh | nare to 21(a)(ii)) | |
| FEDERAL SHARE | • , , | NONFEDERAL | | TOTAL AMOUNT | |
| | | | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 36 | OF | 113 |
|--------|------|-------|---------|
| FOR LI | NF 2 | 1a OF | FORM 3X |

| | | NOIS | | | | | | | | |
|------------|--|------------------|--------------------------------|-------------------|-----------|--------------------------------------|---------------|-----------------|--|--|
| ۸. | Full Name (Last, First, Middle Initial) PNC Bank | Transaction | n ID : H4.36947 | | | ed Activity o | | sing Exemp | | |
| | Mailing Address P.O. Box 609 | | | | | Voter Drive Direct Candidate Support | | | | |
| | City | State | Zip Code | | Pu | ıblic Comm | (ref to party | only) by PAC | | |
| | Pittsburgh | PA | 15230-973 | 8 | | | or Event Ye | • • • | | |
| | Purpose of Disbursement: Service charge | | | · · · | 711100 | ated Hotevity | Of Event 10 | 447438.38 | | |
| | Activity or Event Identifier: | | | | | | | | | |
| | Administrative | | | Category/ Type | Date | 11 | 28 | 2014 | | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = | Т | OTAL AMOU | JNT | | |
| | 345.59 | | , , | 1300.10 | | , | , | 1645.69 | | |
| 3. | Full Name (Last, First, Middle Initial) | Transaction | ı ID : H4.36999 | | Allocate | ed Activity of | r Event: | | | |
| | Internal Revenue Service | | | | \times | dministrative | Fundrai | sing Exemp | | |
| | Mailing Address Department of the Treasur | у | | | ☐ Vo | oter Drive | | Candidate Suppo | | |
| | City | State | Zip Code | | Pu | ıblic Comm | (ref to party | only) by PAC | | |
| | Kansas City | MO | 64999 | | | | or Event Ye | | | |
| | Purpose of Disbursement: Payroll taxes | | | · · · · | | | | 447600.20 | | |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date | M - M / | 28 | 2014 | | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = | Т | OTAL AMOU | JNT | | |
| | 33.98 | | 7 1 1 7 | 127.84 | | | | 161.82 | | |
|) . | Full Name (Last, First, Middle Initial) Illinois Department of Revenue | Transaction | n ID : H4.37000 | | | ed Activity o | | sing Exemp | | |
| | Mailing Address Department of Revenue | | | | 1 — ' | ter Drive | | Candidate Suppo | | |
| | City | State | Zip Code | | Pι | ıblic Comm | (ref to party | only) by PAC | | |
| - | Springfield | IL | 62704 | | Alloc | ated Activity | or Event Ye | ear-To-Date | | |
| | Purpose of Disbursement: Payroll taxes | | | | | | | 447635.86 | | |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date | M M / | 28 | 2014 | | |
| | FEDERAL SHARE + NONFEDERAL SHARE | | | = | Т | OTAL AMOU | JNT | | | |
| | 7.49 | | , , | 28.17 | | | , | 35.66 | | |
| SU | IBTOTAL of Allocated Federal and NonFederal | eral Activity Th | is Page | | | | | | | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | _=_ | Т | OTAL AMOL | JNT | | |
| | 387.06 | | | 1456.11 | | | | 1843.17 | | |
| то | TAL This Period (last page for each line or FEDERAL SHARE | nly)(Federal sh | are to 21(a)(i) and NONFEDERAL | | are to 21 | | OTAL AMOU | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 37 | OF | 113 |
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| | ME OF COMMITTEE (In Full) EMOCRATIC PARTY OF ILLIN | NOIS | | | |
|----|--|-----------------|----------------------|-------------------|--|
| Ā. | Full Name (Last, First, Middle Initial) | Transactio | on ID : H4.36927 | | Allocated Activity or Event: |
| | Clearfire | | | | Administrative Fundraising Exempt |
| | Mailing Address 21 Estretta Way | | | | Voter Drive Direct Candidate Support |
| • | City Novato | State | Zip Code | | Public Comm (ref to party only) by PAC |
| - | Purpose of Disbursement: | CA | 94945 | | - Allocated Activity or Event Year-To-Date |
| | Website updates | | | | 447735.86 |
| | Activity or Event Identifier: | | | Catamamu/ | M = M / D = D / Y = Y = Y |
| | Administrative | | | Category/ Type | Date 12 03 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | TOTAL AMOUNT |
| | 21.00 | | | 79.00 | 100.00 |
| В. | Full Name (Last, First, Middle Initial) | Transaction | n ID : H4.36932 | | Allocated Activity or Event: |
| | Nicor Gas Mailing Address P.O. Box 416 | | | | Administrative Fundraising Exempt |
| | Walling Address P.O. Box 416 | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| - | Aurora | IL | 60568-000 | 1 | Allocated Activity or Event Year-To-Date |
| _ | Purpose of Disbursement: Utilities | | | | 447958.25 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 03 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | | = TOTAL AMOUNT |
| | | 1 | | | |
| | 46.70 | | | 175.69 | 222.39 |
| C. | Full Name (Last, First, Middle Initial) | Transactio | on ID : H4.36941 | | Allocated Activity or Event: |
| | Tim Mapes Mailing Address 632 Old Tippercanoe | | | | Administrative Fundraising Exempt |
| | Walling Address 852 Old Tippercarioe | | | | Voter Drive Direct Candidate Support |
| | City Springfield | State IL | Zip Code 62707 | | Public Comm (ref to party only) by PAC |
| - | Purpose of Disbursement: | IL. | 62707 | | Allocated Activity or Event Year-To-Date |
| | Wages spent < 25% on fea | | | | 463334.50 |
| - | Activity or Event Identifier: | | | | |
| | Administrative | | | Category/ Type | Date 12 03 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 3229.01 | | , , | 12147.24 | 15376.25 |
| SU | BTOTAL of Allocated Federal and NonFeder | ral Activity Th | nis Page | | |
| | FEDERAL SHARE | _ + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 3296.71 | | | 12401.93 | 15698.64 |
| то | TAL This Period (last page for each line onl | y)(Federal sh | nare to 21(a)(i) and | | nare to 21(a)(ii)) TOTAL AMOUNT |
| | | 7 _ | | | 1 |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 38 | OF | 113 | |
|-------|-------|-------|------|----|
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| | AME OF COMMITTEE (In Full) EMOCRATIC PARTY OF ILLIN | VOIS | | | · |
|----|--|------------------|------------------------------------|-------------------|---|
| A. | Full Name (Last, First, Middle Initial) Kathy Murray | | on ID : H4.36942 | | Allocated Activity or Event: Administrative Fundraising Exempt |
| | Mailing Address 500 Wingate Drive | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Sherman Purpose of Disbursement: | IL | 62684 | | Allocated Activity or Event Year-To-Date |
| | Wages spent < 25% on fea | | | | 467281.69 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 03 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 828.91 | | 7 7 | 3118.28 | 3947.19 |
| В. | Full Name (Last, First, Middle Initial) | Transaction | n ID : H4.36943 | | Allocated Activity or Event: |
| | Internal Revenue Service Mailing Address Department of the Treasury | | | | Administrative Fundraising Exempt |
| | | | 7: 0 1 | | Voter Drive Direct Candidate Support |
| | City Kansas City | State MO | Zip Code 64999 | | Public Comm (ref to party only) by PAC |
| | Purpose of Disbursement: Payroll taxes | | | | Allocated Activity or Event Year-To-Date 477649.50 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 03 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 2177.24 | | 7 7 | 8190.57 | 10367.81 |
| C. | Full Name (Last, First, Middle Initial) Illinois Department of Revenue | Transactio | on ID : H4.36945 | | Allocated Activity or Event: X Administrative Fundraising Exempt |
| | Mailing Address Department of Revenue | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Springfield Purpose of Disbursement: | IL | 62704 | | Allocated Activity or Event Year-To-Date |
| | Payroll taxes | | | | 479722.42 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 435.31 |] [[| , , | 1637.61 | 2072.92 |
| SI | JBTOTAL of Allocated Federal and NonFede | eral Activity Th | nis Page | | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 3441.46 | ـــٰـا لـــٰـــ | | 12946.46 | 16387.92 |
| T | OTAL This Period (last page for each line on FEDERAL SHARE | ly)(Federal sh | nare to 21(a)(i) and NONFEDERAL | | nare to 21(a)(ii)) TOTAL AMOUNT |
| | | | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| DEMOCRATIC PARTY OF ILLI | NOIS |
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| ַט | EMOCRATIC PARTY OF ILLINOIS | | |
|------|--|-------------------|---|
| A. | Full Name (Last, First, Middle Initial) Transaction ID : H4.36946 | | Allocated Activity or Event: |
| | Illinois Department of Revenue | | Administrative Fundraising Exempt |
| | Mailing Address Department of Revenue | | Voter Drive Direct Candidate Support |
| | City State Zip Code | | Public Comm (ref to party only) by PAC |
| | Springfield IL 62704 | | , , , , , , |
| | Purpose of Disbursement: Payroll taxes | | - Allocated Activity or Event Year-To-Date 479996.38 |
| | Activity or Event Identifier: | | |
| | Administrative | Category/ Type | Date 12 03 2014 |
| | FEDERAL SHARE + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 57.53 | 216.43 | 273.96 |
| В. | Full Name (Last, First, Middle Initial) Transaction ID : H4.36944 ADP | | Allocated Activity or Event: Administrative Fundraising Exempt |
| | Mailing Address P.O. Box 842854 | | Voter Drive Direct Candidate Support |
| | City State Zip Code | | Public Comm (ref to party only) by PAC |
| | Boston MA 02284 | | |
| | Purpose of Disbursement: Payroll fee | | Allocated Activity or Event Year-To-Date 480072.94 |
| | Activity or Event Identifier: | | |
| | Administrative | Category/ Type | Date 12 05 7 2014 |
| | FEDERAL SHARE + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 16.08 | 60.48 | 76.56 |
| C. | Full Name (Last, First, Middle Initial) Capitol Storage, LLC Transaction ID: H4.36948 | | Allocated Activity or Event: Administrative Fundraising Exempt |
| | Mailing Address 2225 J. David Jones Parkway | | Voter Drive Direct Candidate Support |
| | City State Zip Code | | Public Comm (ref to party only) by PAC |
| | Springfield IL 62707 | | Allocated Activity or Event Year-To-Date |
| | Purpose of Disbursement: Rent | | 481047.94 |
| | Activity or Event Identifier: | | |
| | Administrative | Category/ Type | Date 12 / 05 / 2014 |
| | FEDERAL SHARE + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 204.75 | 770.25 | 975.00 |
| - CI | JBTOTAL of Allocated Federal and NonFederal Activity This Page | | |
| 30 | , , | CHADE | - TOTAL AMOUNT |
| | FEDERAL SHARE + NONFEDERAL | SHANE | = TOTAL AMOUNT |
| Τ. | 278.36 | 1047.16 | 1325.52 |
| 10 | OTAL This Period (last page for each line only)(Federal share to 21(a)(i) and FEDERAL SHARE NONFEDERAL | | TOTAL AMOUNT |
| | | | |
| | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| | PARTY OF ILLIN | 1010 | | | | | | |
|--|---------------------------|------------------|--------------------------------|-------------------|----------|---------------|-----------------|-----------------------------------|
| Full Name (Last, F | • | Transaction | n ID : H4.36951 | | | ed Activity | | ising Exem |
| Mailing Address 6 | 55 W. Irving Park Road | | | | | oter Drive | | Candidate Suppo |
| City | .p 0010 | State | Zip Code | | P | ublic Comn | n (ref to party | only) by PAC |
| Chicago | | IL | 60613 | | Allor | cated Activi | ty or Event Y | ear-To-Date |
| Purpose of Disburs Wages spent < 25 | | | | | Alloc | Saled Activi | ly of Event 1 | 482542.99 |
| Activity or Event Id | | | | | | | | |
| Administrativ | /e | | | Category/ Type | Date | 12 | 11 | 2014 |
| FEI | DERAL SHARE | + | NONFEDERAL | SHARE | = | | TOTAL AMO | UNT |
| | 313.96 | | | 1181.09 |] [| , | , | 1495.05 |
| . Full Name (Last, F | irst, Middle Initial) | Transaction | ID : H4.36952 | | Allocat | ed Activity | or Event: | |
| Emily Wurth | , | | | | \times | dministrativ | e Fundra | ising Exem |
| | 267 Boysenberry Lane | | | | | | | • |
| City | | State | Zip Code | | | oter Drive | | Candidate Suppo , only) by PAC |
| Springfield | | IL | 62711 | | | | | |
| Purpose of Disburs Wages spent < 25 | sement: % on fea | | - | | Alloc | cated Activi | ty or Event Y | 483986.08 |
| Activity or Event lo Administrative | dentifier: | | | Category/ Type | Date | M M M 12 | / D D / | 2014 |
| FEI | DERAL SHARE | + | NONFEDERAL | SHARE | = | | TOTAL AMO | UNT |
| | 303.05 | | 7 | 1140.04 |] [| | | 1443.09 |
| Full Name (Last, F Emily Wurth | irst, Middle Initial) | Transaction | n ID : H4.36954 | | | ed Activity | | ising Exem |
| | 267 Boysenberry Lane | | | | 1 — | oter Drive | | Candidate Suppo |
| City | | State | Zip Code | | P | ublic Comn | ref to party | only) by PAC |
| Springfield | | IL | 62711 | | _ Alloc | cated Activit | ty or Event Y | ear-To-Date |
| | ee spent < 25% on fea | | | | | , | | 484338.22 |
| Activity or Event Io Administrative | dentifier: | | | Category/ Type | Date | 12 | / 11 | 2014 |
| FEI | DERAL SHARE | + | NONFEDERAL | SHARE | = | | TOTAL AMO | UNT |
| | 73.95 | | 7 | 278.19 |] [| , | | 352.14 |
| | ed Federal and NonFede | ral Activity Thi | ŭ | | | | | |
| FEI | DERAL SHARE | _ + | NONFEDERAL | SHARE | _=_ | | TOTAL AMO | JNT |
| | 690.96 | | , , , | 2599.32 | | | | 3290.28 |
| | ast page for each line on | y)(Federal sh | are to 21(a)(i) and NONFEDERAL | | are to 2 | | TOTAL AMO | INT |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| FOR LI | NE 2 | 1a OF | FORM 3X |

| NAME O | OF COMMITTEE (In Full) | | | | FOR LINE 21a OF FORM 3 |
|-----------|--|-----------------|-----------------------|-------------------|---|
| DEMO | OCRATIC PARTY OF ILLIN | NOIS | | | |
| | Name (Last, First, Middle Initial) ernal Revenue Service | Transaction | n ID : H4.36964 | | Allocated Activity or Event: Administrative Fundraising Exempt |
| Mailir | ng Address Department of the Treasury | ′ | | | Voter Drive Direct Candidate Support |
| City | | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | sas City | MO | 64999 | | - Allocated Activity or Event Year-To-Date |
| Payr | ose of Disbursement: roll taxes | | | | 485591.93 |
| | ity or Event Identifier: ministrative | | | Category/ Type | Date 12 11 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 263.28 | | 7 7 | 990.43 | 1253.71 |
| B. Full N | Name (Last, First, Middle Initial) | Transaction | n ID : H4.36965 | | Allocated Activity or Event: |
| | ois Department of Revenue | | | | Administrative Fundraising Exempt |
| Mailir | ng Address Department of Revenue | | | | Voter Drive Direct Candidate Support |
| City | agfiold | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | ngfield ose of Disbursement: | IL | 62704 | | Allocated Activity or Event Year-To-Date |
| Payr | roll taxes | | | | 485795.80 |
| | ity or Event Identifier: inistrative | | | Category/ Type | Date 12 11 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 42.81 | | , , , | 161.06 | 203.87 |
| C. Full N | Name (Last, First, Middle Initial) S | Transaction | n ID : H4.36955 | | Allocated Activity or Event: X Administrative Fundraising Exempt |
| Mailir | ng Address Lockbox 577 | | | | Voter Drive Direct Candidate Support |
| City | ol Stream | State IL | Zip Code 60132-057 | 7 | Public Comm (ref to party only) by PAC |
| | ose of Disbursement: | IL | 60132-037 | <i>I</i> | Allocated Activity or Event Year-To-Date |
| Ship | | | | | 485826.30 |
| | ity or Event Identifier: inistrative | | | Category/ Type | Date 12 17 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 6.40 | | 7 | 24.10 | 30.50 |
| SUBTOT | FEDERAL SHARE | ral Activity Th | is Page NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 312.49 | 1 - | | 1175.59 | 1488.08 |
| TOTAL 1 | This Period (last page for each line onl | y)(Federal sh | are to 21(a)(i) and | NonFederal sh | |
| | FEDERAL SHARE | 7 | NONFEDERAL | | TOTAL AMOUNT |
| | | | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| FOR LI | NF 2 | 1a OF | FORM 3 | X |

| AME OF COMMITTEE (In Full) | | | | FOR LINE 21a OF FORM |
|---|-------------|-----------------|-------------------|---|
| PULL PARTY OF ILL Full Name (Last, First, Middle Initial) | | n ID : H4.36958 | | Allocated Activity or Event: |
| Perkins Coie Mailing Address 607 Fourteenth Street N | 1.W. | | | Administrative Fundraising Exem |
| City | State | Zip Code | | Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC |
| Washington | DC | 20005 | 1 | Allocated Activity or Event Year-To-Date |
| Purpose of Disbursement: Legal | | | | 487706.96 |
| Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 17 2014 |
| FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 394.94 | | , , , | 1485.72 | 1880.66 |
| Full Name (Last, First, Middle Initial) Quill Corporation | Transactio | n ID : H4.36959 | | Allocated Activity or Event: Administrative Fundraising Exem |
| Mailing Address P.O. Box 37600 | | | | Voter Drive Direct Candidate Suppo |
| City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| Philadelphia Purpose of Disbursement: Office supplies | PA | 19101 | | Allocated Activity or Event Year-To-Date 488175.10 |
| Activity or Event Identifier: Administrative | | | Category/ | M = M / D = D / Y = Y = Y = Y |
| | | | Type | Date 12 17 2014 |
| FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 98.31 | | | 369.83 | 468.14 |
| Full Name (Last, First, Middle Initial) AT & T-P.O. Box 5014 Carol Stre | | n ID : H4.36960 | | Allocated Activity or Event: X Administrative Fundraising Exem |
| Mailing Address P.O. Box 5014 | | | | Voter Drive Direct Candidate Suppo |
| City Carol Stream | State IL | Zip Code | | Public Comm (ref to party only) by PAC |
| Purpose of Disbursement: Telephone | IL | 60197 | | Allocated Activity or Event Year-To-Date 488455.72 |
| Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 17 2014 |
| FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 58.93 | | 7 | 221.69 | 280.62 |
| SUBTOTAL of Allocated Federal and NonFe | - | • | | |
| FEDERAL SHARE | | NONFEDERAL | | = TOTAL AMOUNT |
| 552.1 | 8 | | 2077.24 | 2629.42 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

NONFEDERAL SHARE

TOTAL AMOUNT

FEDERAL SHARE

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| FOR LI | NE 2 | 1a OF | FORM | зх |

| D | EMOCR. | ATIC | PA | ARTY | OF | ILLINOIS |
|----|-------------|---------|--------|--------|----------|----------|
| ١. | Full Name (| Last, I | First, | Middle | Initial) | Tran |

| ט | EMOCRATIC PARTY OF ILLII | 1015 | | | |
|----------------------|---|------------------------|---------------------------------|-------------------|--|
| Α. | Full Name (Last, First, Middle Initial) | Transaction | n ID : H4.36961 | | Allocated Activity or Event: |
| | AT & T-P.O. Box 5080 | | | | Administrative Fundraising Exempt |
| | Mailing Address P.O. Box 5080 | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Carol Stream | IL | 60197 | | |
| | Purpose of Disbursement: Telephone | | | | Allocated Activity or Event Year-To-Date 489349.03 |
| | Activity or Event Identifier: | | | | |
| | Administrative | | | Category/ Type | Date 12 17 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 187.60 | | , , , | 705.71 | 893.31 |
| <u></u> - В. | Full Name (Last, First, Middle Initial) | Transaction | n ID : H4.36962 | | Allocated Activity or Event: |
| | AT & T-P.O. Box 5014 Carol Stream | n | | | X Administrative Fundraising Exempt |
| | Mailing Address P.O. Box 5014 | | | | Voter Drive Direct Candidate Support |
| | | | | | |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Carol Stream | IL | 60197 | | Allocated Activity or Event Year-To-Date |
| | Purpose of Disbursement: Telephone | | | | 489394.03 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 17 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 9.45 | | , , , | 35.55 | 45.00 |
| C. | Full Name (Last, First, Middle Initial) | Transaction | n ID : H4.36963 | | Allocated Activity or Event: |
| | Commonwealth Edison | | | | Administrative Fundraising Exempt |
| | Mailing Address P.O. Box 6111 | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Carol Stream | IL | 60197 | | Allocated Activity or Event Year-To-Date |
| | Purpose of Disbursement: Utiltiies | | | | 489453.77 |
| | Activity or Event Identifier: | | | | |
| | Administrative | | | Category/ Type | Date 12 17 2014 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 12.55 |] [| | 47.19 | 59.74 |
| SI | IBTOTAL of Allocated Federal and NonFede | ral Δctivity Th | is Page | | _ |
| 00 | FEDERAL SHARE | + | NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | | 7 | NON EBETTICE | | |
| 209.60 788.45 998.05 | | | | | |
| TC | TAL This Period (last page for each line on FEDERAL SHARE | NonFederal sh SHARE | are to 21(a)(ii)) TOTAL AMOUNT | | |
| | | 7 | | | |
| | | | 7 7 | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| FOR LI | NE 2 | 1a OF | FORM | 3Х |

| _ | EMOCRATIC PARTY OF ILLI | | | | Alla a ata al A ati | tides as Frank |
|----|---|------------------|----------------------|-------------------|---------------------|---|
| A. | Full Name (Last, First, Middle Initial) AIG | Transactio | on ID : H4.36968 | | | ivity or Event: |
| | Mailing Address 22427 Network Place | | | | Administ Voter Dr | |
| | City | State | Zip Code | | Bublic C | comm (ref to party only) by PAC |
| | Chicago | IL | 60673-122 | 24 | | |
| | Purpose of Disbursement: Insurance workmans comp | | | | Allocated A | activity or Event Year-To-Date 492400.77 |
| | Activity or Event Identifier: | | | | | , |
| | Administrative | | | Category/ Type | Date 12 | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = | TOTAL AMOUNT |
| | 618.87 | | 7 | 2328.13 | | 2947.00 |
| В. | Full Name (Last, First, Middle Initial) | Transactio | n ID : H4.36969 | | Allocated Acti | ivity or Event: |
| | UPS | | | | _ X Administ | rative Fundraising Exempt |
| | Mailing Address Lockbox 577 | | | | Voter Dr | ive Direct Candidate Support |
| | City | State | Zip Code | | Public C | comm (ref to party only) by PAC |
| - | Carol Stream IL 60132-0577 | | | | Allocated A | activity or Event Year-To-Date |
| | Purpose of Disbursement: Shipping | | | | | 493186.24 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 | 22 2014 |
| | FEDERAL SHARE | = | TOTAL AMOUNT | | | |
| | 164.95 | | 7 7 | 620.52 | | 785.47 |
| C. | Full Name (Last, First, Middle Initial) Comcast Cable | Transactio | on ID : H4.36972 | | Allocated Acti | |
| | Mailing Address P.O. Box 3001 | | | | Voter Dr | |
| | City Southeastern | State PA | Zip Code 19398 | | | omm (ref to party only) by PAC |
| | Purpose of Disbursement: | .,, | 10000 | | _ Allocated A | ctivity or Event Year-To-Date |
| | Internet | | | | | 493354.72 |
| | Activity or Event Identifier: Administrative | | | Category/ Type | Date 12 | 00 0011 |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = | TOTAL AMOUNT |
| | 35.38 | | 7 | 133.10 | | 168.48 |
| SI | JBTOTAL of Allocated Federal and NonFede | eral Activity Th | nis Page | | | |
| | FEDERAL SHARE | + | NONFEDERAL | SHARE | = | TOTAL AMOUNT |
| | 819.20 | | , , , | 3081.75 | | 3900.95 |
| TC | OTAL This Period (last page for each line or | nlv)(Federal sh | nare to 21(a)(i) and | d NonFederal sh | nare to 21(a)(ii)) | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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| | ME OF COMMITTEE (In Full) EMOCRATIC PARTY OF ILLINOIS | | | | |
|----|---|-------------------|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Transaction ID : H4.36974 | | Allocated Activity or Event: | | |
| | Kenny and Kenny, P.C. | | Administrative Fundraising Exemp | | |
| | Mailing Address 1400 W. 47th Street | | Voter Drive Direct Candidate Suppor | | |
| | City State Zip Code | | Public Comm (ref to party only) by PAC | | |
| | La Grange IL 60525 | | | | |
| | Purpose of Disbursement: Bookkeeping | | - Allocated Activity or Event Year-To-Date 497052.22 | | |
| | Activity or Event Identifier: | | | | |
| | Administrative | Category/ Type | Date 12 22 2014 | | |
| | FEDERAL SHARE + NONFEDERAL | SHARE | = TOTAL AMOUNT | | |
| | 776.48 | 2921.02 | 3697.50 | | |
| В. | Full Name (Last, First, Middle Initial) Transaction ID: H4.36975 CWLP | | Allocated Activity or Event: | | |
| | Mailing Address 300 South Seventh Street | | Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor | | |
| | City State Zip Code | | | | |
| - | Springfield IL 62757 | | Public Comm (ref to party only) by PAC | | |
| | Purpose of Disbursement: | | Allocated Activity or Event Year-To-Date | | |
| | Utilities | | 497069.08 | | |
| | Activity or Event Identifier: Administrative | Category/ Type | Date 12 24 2014 | | |
| | FEDERAL SHARE + NONFEDERAL | = TOTAL AMOUNT | | | |
| | 254 | 10.00 | | | |
| | 3.54 | 13.32 | 16.86 | | |
| C. | Full Name (Last, First, Middle Initial) AT & T Teleconference Services Transaction ID: H4.36979 | | Allocated Activity or Event: Administrative Fundraising Exempt | | |
| | Mailing Address P.O. Box 5002 | | Voter Drive Direct Candidate Suppor | | |
| | City State Zip Code | | Public Comm (ref to party only) by PAC | | |
| | Carol Stream IL 60197 | | Allocated Activity or Event Year-To-Date | | |
| | Purpose of Disbursement: Telephone | | 497263.79 | | |
| | Activity or Event Identifier: Administrative | Category/ Type | Date 12 24 2014 | | |
| | FEDERAL SHARE + NONFEDERAL | SHARE | = TOTAL AMOUNT | | |
| | | 1 1 1 1 1 1 1 1 | | | |
| | 40.89 | 153.82 | 194.71 | | |
| SI | JBTOTAL of Allocated Federal and NonFederal Activity This Page | | | | |
| | FEDERAL SHARE + NONFEDERAL | . SHARE | = TOTAL AMOUNT | | |
| | 820.91 | 3088.16 | 3909.07 | | |
| TC | OTAL This Period (last page for each line only)(Federal share to 21(a)(i) an FEDERAL SHARE NONFEDERAL | | are to 21(a)(ii)) TOTAL AMOUNT | | |
| | | | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 46 | OF | 113 | |
|--------|------|-------|------|----|
| FOR LI | NE 2 | 1a OF | FORM | 3X |

| Mailing Address 111 West Washington City State Zip Code Chicago IL 60602 Purpose of Disbursement: Voter Drive Directory Public Comm (ref to public Comm (ref to public Comm) Allocated Activity or Eve | ndraising Exempt ect Candidate Support party only) by PAC |
|---|--|
| Mailing Address 111 West Washington City State Zip Code Chicago IL 60602 Purpose of Disbursement: Voter Drive Directory Public Comm (ref to public Comm (ref to public Comm) Allocated Activity or Eve | ect Candidate Support party only) by PAC nt Year-To-Date 499123.26 |
| Chicago IL 60602 Purpose of Disbursement: Allocated Activity or Eve | nt Year-To-Date 499123.26 |
| Purpose of Disbursement: | 499123.26 |
| | |
| Rent | |
| Activity or Event Identifier: Administrative Category/ Type Date 12 29 | 2014 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL A | MOUNT |
| 390.49 | 1859.47 |
| B. Full Name (Last, First, Middle Initial) Transaction ID: H4.36984 Allocated Activity or Event: | |
| Mailing Address Lockbox 577 | ndraising Exempt |
| | ect Candidate Support |
| City State Zip Code Public Comm (ref to p | party only) by PAC |
| Carol Stream IL 60132-0577 Allocated Activity or Eve Purpose of Disbursement: | nt Year-To-Date |
| Shipping | 499178.98 |
| Activity or Event Identifier: Administrative Category/ Type Date 12 30 | 2014 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL A | MOUNT |
| 11.70 | 55.72 |
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.36985 Allocated Activity or Event: | |
| | ndraising Exempt |
| Mailing Address P.O. Box 96003 | ect Candidate Support |
| City State Zip Code Public Comm (ref to p | party only) by PAC |
| Charlotte NC 28296-0003 Allocated Activity or Ever | nt Year-To-Date |
| Telephone | 499220.44 |
| Activity or Event Identifier: Administrative Category/ Type Date Date | 2014 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL A | MOUNT |
| 8.71 | 41.46 |

| SUBTOTAL of Allocated Federal and Non | Federal Activity 1 | Γhis Page | | |
|---------------------------------------|--------------------|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |

410.90 1545.75 1956.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FED | ERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|-----|------------|------------------|--------------|
| | | | |
| , | | | |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 47 | OF | 113 |
|--------|------|-------|---------|
| FOR LI | NE 2 | 1a OF | FORM 3X |

| NAME OF COMMITTEE (In Full) | | | FOR LINE 21a OF FORM 3 |
|--|--|-------------------|--|
| DEMOCRATIC PARTY OF ILL | INOIS | | |
| A. Full Name (Last, First, Middle Initial) TTI National | Transaction ID: H4.36986 | | Allocated Activity or Event: Administrative Fundraising Exempt |
| Mailing Address P.O. Box 96003 | | | Voter Drive Direct Candidate Support |
| City Charlotte | State Zip Code NC 28296-000 | 3 | Public Comm (ref to party only) by PAC |
| Purpose of Disbursement: Telephone | | | Allocated Activity or Event Year-To-Date 499239.41 |
| Activity or Event Identifier: Administrative | | Category/ | M = M / D = D / Y = Y = Y |
| | | Type | Date 12 30 2014 |
| FEDERAL SHARE | + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 3.98 | | 14.99 | 18.97 |
| B. Full Name (Last, First, Middle Initial) Sarah Nelson | Transaction ID: H4.36988 | | Allocated Activity or Event: Administrative Fundraising Exempt |
| Mailing Address 655 W. Irving Park Road Apt. 5015 | i | | Voter Drive Direct Candidate Support |
| City Chicago | State Zip Code IL 60613 | | Public Comm (ref to party only) by PAC |
| Purpose of Disbursement: Wages spent < 25% on fea | IL 60013 | | Allocated Activity or Event Year-To-Date 500239.85 |
| Activity or Event Identifier: Administrative | | Category/ Type | Date 12 30 2014 |
| FEDERAL SHARE | + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 210.09 | | 790.35 | 1000.44 |
| C. Full Name (Last, First, Middle Initial) Emily Wurth | Transaction ID: H4.36989 | | Allocated Activity or Event: X Administrative Fundraising Exempt |
| Mailing Address 2267 Boysenberry Lane | | | Voter Drive Direct Candidate Support |
| City Springfield | State Zip Code IL 62711 | | Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date |
| Purpose of Disbursement: Wages spent < 25% on fea | Purpose of Disbursement: | | |
| Activity or Event Identifier: Administrative | | Category/ Type | Date 12 30 2014 |
| FEDERAL SHARE | + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 25.66 | | 96.55 | 122.21 |
| SUBTOTAL of Allocated Federal and NonFe | ederal Activity This Page | | |
| FEDERAL SHARE | + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| 239.73 | | 901.89 | 1141.62 |
| TOTAL This Period (last page for each line FEDERAL SHARE | only)(Federal share to 21(a)(i) and NONFEDERAL | | are to 21(a)(ii)) TOTAL AMOUNT |

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | 48 | 3 C |)F | 113 | |
|------|------|-----|----|------|----|
| FOR | LINE | 21a | OF | FORM | зх |

| | ME OF COMMITTEE (In Full) EMOCRATIC PARTY OF ILLINOIS | | |
|----|---|---|---|
| Ā. | Full Name (Last, First, Middle Initial) Internal Revenue Service Transaction ID: H4.36993 | | Allocated Activity or Event: X Administrative Fundraising Exempt |
| | Mailing Address Department of the Treasury | | Voter Drive Direct Candidate Support |
| | City State Zip Code | Public Comm (ref to party only) by PAC | |
| | Kansas City MO 64999 | - Allocated Activity or Event Year-To-Date | |
| | Purpose of Disbursement: Payroll taxes | | 500761.82 |
| | Activity or Event Identifier: | | |
| | Administrative | Category/ Type | Date 12 30 2014 |
| | FEDERAL SHARE + NONFEDERA | L SHARE | = TOTAL AMOUNT |
| | 83.95 | 315.81 | 399.76 |
| В. | Full Name (Last, First, Middle Initial) Transaction ID: H4.36994 Illinois Department of Revenue | | Allocated Activity or Event: Administrative Fundraising Exempt |
| | Mailing Address Department of Revenue | Administrative Fundraising Exempt Voter Drive Direct Candidate Support | |
| | City State Zip Code | | Public Comm (ref to party only) by PAC |
| | Springfield IL 62704 | | Allocated Activity or Event Year-To-Date |
| | Purpose of Disbursement: Payroll taxes | | 500835.98 |
| | Activity or Event Identifier: | | 7 |
| | Administrative | Category/ Type | Date 12 30 2014 |
| | FEDERAL SHARE + NONFEDERA | = TOTAL AMOUNT | |
| | 15.57 | 58.59 | 74.16 |
| C. | Full Name (Last, First, Middle Initial) | | Allocated Activity or Event: Administrative Fundraising Exempt |
| | Mailing Address | | Voter Drive Direct Candidate Support |
| | City State Zip Code | | Public Comm (ref to party only) by PAC |
| | Purpose of Disbursement: | | Allocated Activity or Event Year-To-Date |
| | | | |
| | Activity or Event Identifier: | Category/ Type | Date M M / D D / Y Y Y Y Y |
| | FEDERAL SHARE + NONFEDERA | L SHARE | = TOTAL AMOUNT |
| | | | 1 |
| _ | | | |
| Sl | JBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | 99.52 | 374.40 | 473.92 |
| TC | OTAL This Period (last page for each line only)(Federal share to 21(a)(i) ar FEDERAL SHARE NONFEDERAL | | are to 21(a)(ii)) TOTAL AMOUNT |
| | 13454.31 | 50613.87 | 64068.18 |
| | | | |

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE 49 OF 113 FOR LINE 18b OF FORM 3X

| NAL ()L ('()NANALLILL /I∞ L) | | FOR LINE 18b OF FORM |
|---|--|-----------------------------|
| ME OF COMMITTEE (In Full) MOCRATIC PARTY OF ILLINOIS | | |
| | | |
| NAME OF ACCOUNT Democratic Party of IL Non Federal | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
| , | 12 03 | 2014 375408.88 |
| BREAKDOWN OF THIS TRANSFE | ER | Transaction ID: H5.37002 |
| i) Voter Registration | | VOTER REGISTRATION |
| Total Amount Transferre | ed for Voter Registration | 0.00 |
| II) Votos ID | | VOTER ID |
| ii) Voter ID Total Amount Transferre | ed for Voter ID | 0.00 |
| | | GOTV |
| iii) GOTV | | |
| Total Amount Transferre | ed for GOTV | |
| iv) Generic Campaign Ac | tivity | GENERIC CAMPAIGN ACTIVITY |
| | ed for Generic Campaign Activity | 375408.88 |
| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
| Democratic Party of IL Non Federal | M - M / D - D / 12 17 | 2014 84771.61 |
| BREAKDOWN OF THIS TRANSFI | FR | Transaction ID: H5.37299 |
| | | VOTER REGISTRATION |
| i) Voter Registration Total Amount Transferre | ed for Voter Registration | 0.00 |
| Total 7 tillount Transform | od for votor riogiculation | VOTER ID |
| ii) Voter ID | | 0.00 |
| Total Amount Transferre | ed for Voter ID | 0.00 |
| iii) GOTV | | GOTV |
| • | ed for GOTV | 70354.10 |
| | | GENERIC CAMPAIGN ACTIVITY |
| iv) Generic Campaign Ac | et ivity ed for Generic Campaign Activity | 14417.51 |
| Total Amount Transform | ou for denote dampaign houvely | |
| TOTAL | S FOR BREAKDOWN OF TRANSFER | R RECEIVED (Last Page Only) |
| TOTAL This Period (Voter Re | gistration) | 0.00 |
| | | |
| TOTAL This Period (Voter ID) | | 0.00 |
| TOTAL This Period (GOTV) | | 70354.10 |
| () | | |
| | Campaign Activity) | |
| TOTAL This Period (Generic C | Campaign Activity) | |

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL.37003 NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS NAME OF ACCOUNT Democratic Party of IL Non Federal **COLUMN A COLUMN B TOTAL THIS PERIOD** YEAR-TO-DATE RECEIPTS FROM PERSONS 40000.00 10000.00 (a) Itemized (Use Schedule L-A) 0.00 0.00 (b) Unitemized 10000.00 40000.00 (c) Total..... OTHER RECEIPTS..... 970828.88 1890678.88 980828.88 1930678.88 3. TOTAL RECEIPTS (Add Lines 1c and 2) 4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B) 0.00 0.00 (a) Voter Registration (b) Voter ID..... 0.00 0.00 0.00 (c) GOTV 0.00 460360.49 1408260.69 (d) Generic Campaign..... 460360.49 1408260.69 (e) Total..... 0.00 0.00 OTHER DISBURSEMENTS..... 6. TOTAL DISBURSEMENTS 460360.49 1408260.69 (Add Lines 4e and 5) 0.00 1949.80 BEGINNING CASH ON HAND..... 7. (for Column B, use cash as of January 1st) 8. RECEIPTS 980828.88 1930678.88 (from Line 3) SUBTOTAL(Add Lines 7 and 8) 982778.68 1930678.88 9. 460360.49 1408260.69 DISBURSEMENTS 10. (From Line 6) 11. ENDING CASH ON HAND.. 522418.19 522418.19 (Subtract Line 10 From Line 9)

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Bruce Sagan Account: 18789 01 2014 Mailing Address 415 E. North Water # 1505 Transaction ID: SASL1A.37169 Amount of Each Receipt this Period City State Zip Code Chicago 60611 10000.00 Name of Employer or Principal Place of Business Herald Newspaper Aggregate Year-to-Date Occupation Jounalist Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt В. Account : Mailing Address Amount of Each Receipt this Period Zip Code City State Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Account Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Account: Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 10000.00 SUBTOTAL of Receipts This Page (optional)..... 10000.00 TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

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| \nearrow DEMOCRATIC PAR $^{	au}$ | ΓΥ OF ILLIN | IOIS | |
|--|----------------|-------------------|--|
| Full Name (Last, First, Middle Initial) / Full Org | anization Name | | Date of Receipt |
| A. 1528 Partners, LP | Account : | 18789 | 10 03 2014 |
| Mailing Address 1541 N. Wells Street | | | Transaction ID : SASL2.37175 |
| City | Ctata | Zin Codo | Amount of Each Receipt this Period |
| City Chicago | State IL | Zip Code 60610 | 2525.00 |
| Name of Employer or Principal Place of Busine | ess | | Aggregate Year-to-Date |
| Occupation | | | Aggregate real-to-bate |
| Сосираноп | | | |
| Full Name (Last, First, Middle Initial) / Full Org | anization Name | | Date of Receipt |
| B. 1541/53 Partners, LP | | | M = M / D = D / Y = Y = Y |
| Mailing Addross | Account : | 18789 | 10 03 2014 |
| Mailing Address 1541 N. Wells Street | | | Transaction ID: SASL2.37176 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | State | 60610 | 2250.00 |
| Name of Employer or Principal Place of Busine | | | 2250.00 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Org | anization Name | | Date of Receipt |
| c. 1543/51 Partners, LP | | 40700 | M = M / D = D / Y = Y = Y |
| Mailing Address | Account : | 18789 | 10 03 2014 |
| Mailing Address ₁₅₄₁ N. Wells Street | | | Transaction ID : SASL2.37178 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | IL | 60610 | 2450.00 |
| Name of Employer or Principal Place of Busine | ess | | 7 7 7 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full Org | anization Nama | | |
| D. Abbott House | anization Name | | Date of Receipt |
| D. Abbott House | Account | : 18789 | 10 03 2014 |
| Mailing Address 405 Central Avenue | | | Transaction ID : SASL2.37180 |
| 100 Contral / Worldo | | | Amount of Each Receipt this Period |
| City | State | Zip Code | - I and an a second the following the follow |
| Highland Park | IL | 60035 | 3100.00 |
| Name of Employer or Principal Place of Busine | ess | | Aggregate Veer to Date |
| Occupation | | | Aggregate Year-to-Date |
| Оссираноп | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 10325.00 |
| TOOD TO THE OF THE COPHOTIAL) | | | |
| TOTAL This Period (last page this line number of | only) | | |
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Use separate schedule(s) for each category of the Aggregation Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE Account: 18789 28 2014 Mailing Address 100 Abbott Park Rd. Transaction ID: SASL2.37087 D312 AP6D-2 Amount of Each Receipt this Period City State Zip Code Abbott Park 60064 1000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. AFSCME Illinois council 31 PAC Account: 18789 03 2014 Mailing Address 615 South Second Street Transaction ID: SASL2.37182 Amount of Each Receipt this Period City State Zip Code Springfield IL 60605 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt c. AGL Resources Account: 18789 09 28 2014 Mailing Address P.O. Box 4569 Transaction ID: SASL2.37088 Amount of Each Receipt this Period City State Zip Code Atlanta GΑ 30302 5000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. AIG - SAP Account: 18789 01 2014 Mailing Address P.O. Box 9918 Transaction ID: SASL2.37732 Amount of Each Receipt this Period City State Zip Code 79105 TX 6829.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation

| SUBTOTAL of Receipts This Page (optional) | | Ξ | 7 | Ξ | Ξ | 7 | Ī | 228 | 29.0 | 0 |
|---|--|---|---|---|---|---|---|-----|------|---|
| TOTAL This Period (last page this line number only) | | _ | 7 | _ | _ | 7 | _ | Ξ | | _ |

Use separate schedule(s) for each category of the Aggregation Page

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| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
|--|------------------|-------------------|------------------------------------|
| Albany Care, Inc. | Account : | 18789 | 09 28 2014 |
| Mailing Address _{901 Maple} | | | Transaction ID : SASL2.37090 |
| City | C: : | 75.0.1 | Amount of Each Receipt this Period |
| City Evanston | State IL | Zip Code 60202 | |
| Name of Employer or Principal Place of Busi | | 00202 | 10000.00 |
| 5. Employer of Filliopal Flace of Dust | | | Aggregate Year-to-Date |
| Occupation | | | 1 |
| • | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| Alden Management Services, Inc. | | | M = M / D = D / Y = Y = Y |
| Markey Add | Account : | 18789 | 10 17 2014 |
| Mailing Address 4200 West Peterson | | | Transaction ID : SASL2.37681 |
| City | C: : | 75.0.1 | Amount of Each Receipt this Period |
| City Chicago | State | Zip Code 60646 | |
| Name of Employer or Principal Place of Busi | ness | UU040 | 300.00 |
| or Employer of Employer I doe of Dust | | | Aggregate Year-to-Date |
| Occupation | | | , iggiogato roal to bate |
| | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| Alfred G. Ronan, Ltd. | | | M = M / D = D / Y = Y = Y |
| | Account | 18789 | 09 25 2014 |
| Mailing Address 328 South Oak Park Avenue | | | Transaction ID : SASL2.37046 |
| 011 | e | · | Amount of Each Receipt this Period |
| City Oak Park | State IL | Zip Code 60302 | |
| Name of Employer or Principal Place of Busi | | 00302 | 500.00 |
| 3. Employor of Filliopal Flace of Dust | | | Aggregate Year-to-Date |
| Occupation | | | |
| • | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| Alliance for Living, NFP | J | | Date of Receipt |
| <u> </u> | Accoun | t: 18789 | 10 19 2014 |
| Mailing Address 1 Northfield Plaza | | | Transaction ID : SASL2.37695 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Northfield | IL | 60093 | 1565.00 |
| Name of Employer or Principal Place of Busi | ness | | Aggregate Veer to Date |
| Occupation | | | Aggregate Year-to-Date |
| - Joupanon | | | |
| | | | |
| CHRTOTAL of Possints This Poss (anticant) | | - | 12365.00 |
| UBTOTAL of Receipts This Page (optional) | | | 1233.00 |
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Use separate schedule(s) for each category of the Aggregation Page

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| Any information copied from such Reports and Star | tements may not be so | ld or used by any per | rson for the purpose of soliciting contributions |
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| or for commercial purposes, other than using the n | | | |
| NAME OF COMMITTEE (In Full) | | | |
| DEMOCRATIC PART | | NOIS | |
| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
| A. Altria Client Services, Inc. | | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account : | 18789 | 10 12 2014 |
| Mailing Address 6601 West Broad Street | | | Transaction ID : SASL2.37244 |
| C:h. | Ctata | Zin Codo | Amount of Each Receipt this Period |
| City Richmond | State VA | Zip Code 23230 | 775000 |
| Name of Employer or Principal Place of Busines | | 20200 | 7750.00 |
| | ,, | | Aggregate Year-to-Date |
| Occupation | | | 00 0 |
| · | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
| 3. Ameren Illinois | | | · |
| | Account : | 18789 | 10 17 2014 |
| Mailing Address P.O. Box 66892 | | | Transaction ID : SASL2.37682 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | - I mount of Each Hoodpt time i chec |
| St. Louis | MO | 63166 | 1100.00 |
| Name of Employer or Principal Place of Busines | SS | | |
| - | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
| C. Ameren Illinois PAC | | 40700 | M = M / D = D / Y = Y = Y |
| Mailing Address | Account | 18789 | 10 14 2014 |
| Mailing Address 200 W. Washington | | | Transaction ID : SASL2.37261 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Springfield | IL | 62701 | 10000.00 |
| Name of Employer or Principal Place of Busines | SS | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | | | Date of Receipt |
| Anesi Ozmon Rodin Novak & Kohen, Lt | d. | | M M / D D / Y Y Y Y |
| | Accou | nt: 18789 | 10 12 2014 |
| Mailing Address 161 North Clark | | | Transaction ID : SASL2.37245 |
| C:b. | 01-1- | 7in Oada | Amount of Each Receipt this Period |
| City Chicago | State | Zip Code 60601 | |
| Name of Employer or Principal Place of Busines | IL SS | 00001 | 10000.00 |
| or Employer or i intolpar i lade of Busines | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| | | | , |
| | | | 00050 00 |
| SUBTOTAL of Receipts This Page (optional) | | ····· | 28850.00 |

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

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| | DEMOCRATIC PARTY | | NOIS | |
|----------|--|--------------|-------------|--|
| | Full Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| Α. | ASGK Public Strategies, LLC | Account : | 18789 | 10 24 2014 |
| | Mailing Address 730 N. Franklin Street | | | Transaction ID : SASL2.37711 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Chicago | IL | 60654 | 3500.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Veer to Date |
| | Occupation | | | Aggregate Year-to-Date |
| | Occupation | | | |
| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| | Association Venture Corporation | - | | <u>'</u> |
| • | | Account : | 18789 | 10 19 2014 |
| | Mailing Address 1151 East Warrenville Road | | | |
| | Ess ranomino rodu | | | Transaction ID : SASL2.37696 Amount of Each Receipt this Period |
| | City | State | Zip Code | Amount of Lacit neceipt this refloc |
| | Naperville | IL | 60563 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| | Astellas Pharma US, Inc. | | | <u>'</u> |
| | | Account | : 18789 | 09 28 2014 |
| | Mailing Address Three Parkway North | | | Transaction ID : SASL2.37092 |
| | so raining Holli | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | Amount of Lacit neceipt this remod |
| | Deerfield | IL | 60015 | 1000.00 |
| | Name of Employer or Principal Place of Business | | | |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
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| _ | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| | AT & T Illinois Employee PAC | - | | M M / D D / Y Y Y Y |
| | | Accour | nt: 18789 | 10 12 2014 |
| | Mailing Address 225 West Randolph | | | Transaction ID : SASL2.37247 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | , and an each recorpt this i endu |
| | Chcicago | IL | 60606 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | |
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|---|------------------|----------|---|
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| A. Atkinson for Congress | Account : | 18789 | 11 01 2014 |
| Mailing Address P.O. Box 97 | | | Transaction ID : SASL2.37733 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Willow Springs Name of Employer or Principal Place of Busi | IL noon | 60480 | 2000.00 |
| Name of Employer of Principal Place of Busi | ness | | Aggregate Veer to Date |
| Ossum a Fran | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| B. B & D Hotel Corporation | • | | M M / D D / Y Y Y Y Y |
| • | Account : | 18789 | 09 28 2014 |
| Mailing Address 321 N. Central Avenue | | | Transaction ID : SASL2.37094 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | 7 Amount of Lacri receipt tills I ellou |
| Chicago | IL | 60644 | 7002.24 |
| Name of Employer or Principal Place of Busi | ness | | |
| | | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| C. Barton Management | | | M = M / D = D / Y = Y = Y |
| | Account : | 18789 | 10 19 2014 |
| Mailing Address 465 Central Avenue | | | Transaction ID : SASL2.37697 |
| Suite 100 | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Northfield | IL . | 60093 | 7550.00 |
| Name of Employer or Principal Place of Busi | ness | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
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| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| . Bayside Terrace | | | M M / D D / Y Y Y Y |
| | Account | : 18789 | 10 03 2014 |
| Mailing Address 1100 South Lewis Avenue | | | Transaction ID : SASL2.37184 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Waukegan | IL | 60085 | 4875.00 |
| Name of Employer or Principal Place of Busi | ness | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
|---|------------|-------------------|--|
| Beavers & Graham | Account : | 18789 | M M / D D / Y Y Y Y |
| Mailing Address P.O. Box 320 | Account : | 10103 | 11 01 2014 Transaction ID : SASL2.37734 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Taylorville | IL | 62568 | 300.00 |
| Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
| Occupation | | | Aggregate rear-to-Date |
| Cocapadon | | | |
| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| Belmont Nursing Home, Inc. | | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account : | 18789 | 10 12 2014 |
| Mailing Address 1936 W. Belmont Avenue | | | Transaction ID : SASL2.37249 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | State | 2ip Code 60657 | 1785.00 |
| Name of Employer or Principal Place of Business | | | 1785.00 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
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| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| Brent Hassert Consulting, LLC | Account | : 18789 | M = M / D = D / Y = Y = Y |
| Mailing Address 24820 West Easy Street | Account | . 10703 | 10 16 2014 |
| - 27020 West Lasy Stiest | | | Transaction ID : SASL2.37270 Amount of Each Receipt this Period |
| City | State | Zip Code | Amount of Lacif neceipt this Fellod |
| Plainfield | IL | 60586 | 500.00 |
| Name of Employer or Principal Place of Business | | | |
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| Edition (Lat. Flat. Mills. 198. N. / E. H. O. | Par Name | | |
| Full Name (Last, First, Middle Initial) / Full Organiza Bryn Mawr Care, Inc. | ation Name | | Date of Receipt |
| Diyii wawi Cale, Ilic. | Accoun | t: 18789 | M M / D D / Y Y Y Y Y |
| Mailing Address 5547 North Kenmore | 7.000011 | | 09 28 2014 |
| 5547 NOTH Remindle | | | Transaction ID : SASL2.37095 Amount of Each Receipt this Period |
| City | State | Zip Code | 7 Amount of Each fledelpt this Fellou |
| Chicago | IL | 60640 | 5065.00 |
| Name of Employer or Principal Place of Business | | | Aggregate Veer to Date |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Burke Wise & Morrissey, LLC Account: 18789 19 2014 Mailing Address 161 North Clark Street Transaction ID: SASL2.37698 Amount of Each Receipt this Period City State Zip Code Chicago 60601 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Capitol F. Consulting, LLC Account: 18789 2014 Mailing Address 980 N. Michigan Avenue Transaction ID: SASL2.37273 Amount of Each Receipt this Period Zip Code City State Chicago IL 60611 500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Capitol F. Consulting, LLC Account: 18789 10 16 2014 Mailing Address 980 N. Michigan Avenue Transaction ID: SASL2.37667 Amount of Each Receipt this Period City State Zip Code Chicago IL 60611 500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Capitol F. Consulting, LLC Account: 18789 16 2014 Mailing Address 980 N. Michigan Avenue Transaction ID: SASL2.37675 Amount of Each Receipt this Period City State Zip Code 60611 IL -500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation

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| | Full Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| Α. | Carpenter Lipps & Leland LLP | | 10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | Mailing Address 280 N. High Street | | | Transaction ID : SASL2.37186 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Columbus | ОН | 43215 | 1000.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Veer to Dete |
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| В. | Cates Mahoney, LLC | | | M = M / D = D / Y = Y = Y |
| | Mailing Address | Account : | 18789 | 10 08 2014 |
| | Mailing Address 216 West Pointe Drive | | | Transaction ID : SASL2.37217 |
| | 0.1 | 0: : | 7'- 0 - | Amount of Each Receipt this Period |
| | City Swansea | State | Zip Code | |
| | Name of Employer or Principal Place of Business | IL | 62226 | 5000.00 |
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| C. | Cavanagh Law Group | | 40700 | M = M / D = D / Y = Y = Y |
| | Mailing Address | Account | : 18789 | 09 28 2014 |
| | Mailing Address 161 N. Clark Streeet | | | Transaction ID : SASL2.37099 |
| | City | Ctoto | Zin Codo | Amount of Each Receipt this Period |
| | City Chicago | State IL | Zip Code 60601 | 10000 00 |
| | Name of Employer or Principal Place of Business | IL | 00001 | 10000.00 |
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| | Mailing Address CENTENE PLAZA 7700 FORSYTH BLV | Accour | nt: 18789 | 10 03 2014 |
| | CENTENE PLAZA 7700 FORSYTH BL\ | D. | - | Transaction ID : SASL2.37188 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | ST. LOUIS | MO | 63105 | |
| | Name of Employer or Principal Place of Business | IVIO | 00100 | 450.00 |
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| Mailing Address 500 New Jersey Avenue NW City State Washington DC Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Chapman & Cutler | ount: 18789 | Zip Code 20001 Zip Code 60603 | Transaction ID: SASL2.37722 Amount of Each Receipt this Period 2500.00 Aggregate Year-to-Date Date of Receipt 10 03 2014 Transaction ID: SASL2.37189 Amount of Each Receipt this Period |
|--|----------------|--|--|
| Address 500 New Jersey Avenue NW State Washington DC Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Chapman & Cutler Accordialing Address 111 West Monroe Sity State Chicago IL Name of Employer or Principal Place of Business | ount: 18789 | Zip Code | Transaction ID: SASL2.37722 Amount of Each Receipt this Period 2500.00 Aggregate Year-to-Date Date of Receipt 10 03 2014 Transaction ID: SASL2.37189 |
| City State Washington DC Name of Employer or Principal Place of Business Coccupation Full Name (Last, First, Middle Initial) / Full Organization Name Chapman & Cutler Accordialling Address 111 West Monroe City State Chicago IL Jame of Employer or Principal Place of Business | ount: 18789 | Zip Code | Amount of Each Receipt this Period 2500.00 Aggregate Year-to-Date Date of Receipt 10 03 2014 Transaction ID: SASL2.37189 |
| Washington DC Name of Employer or Principal Place of Business Decupation Full Name (Last, First, Middle Initial) / Full Organization Name Chapman & Cutler Accordialling Address 111 West Monroe City State Chicago IL Jame of Employer or Principal Place of Business | ount: 18789 | Zip Code | Date of Receipt Date of Receipt 10 03 2014 |
| Decupation Full Name (Last, First, Middle Initial) / Full Organization Name Chapman & Cutler Accordialling Address 111 West Monroe City State Chicago IL Jame of Employer or Principal Place of Business | | Zip Code | Aggregate Year-to-Date Date of Receipt 10 03 2014 Transaction ID: SASL2.37189 |
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| Chapman & Cutler Mailing Address 111 West Monroe City State Chicago IL Name of Employer or Principal Place of Business | | | 10 03 2014 Transaction ID : SASL2.37189 |
| Chapman & Cutler Mailing Address 111 West Monroe City State Chicago IL Name of Employer or Principal Place of Business | | | 10 03 2014 Transaction ID : SASL2.37189 |
| Mailing Address 111 West Monroe City State Chicago IL Name of Employer or Principal Place of Business | | | 10 |
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| Name of Employer or Principal Place of Business | | | 5000.00 |
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| Full Name (Last, First, Middle Initial) / Full Organization Name | | | Date of Receipt |
| Chicago Investments, Inc. | .0001:01: 40-0 |) 0 | M = M / D = D / Y = Y = Y |
| Mailing Address 1541 N. Wells Street | Account: 1878 | າ ປ | 10 03 2014 |
| 3 1541 N. Wells Street | | | Transaction ID : SASL2.37194 |
| Dity State | | Zip Code | Amount of Each Receipt this Period |
| Chicago IL | | 60610 | 2550.00 |
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| Full Name (Last, First, Middle Initial) / Full Organization Name | | | Date of Receipt |
| Chicago Investments II, LP | Account: 187 | 789 | M M / D D / Y Y Y Y Y |
| Mailing Address 1541 N. Wells Street | Account. 10 | | 10 03 2014 |
| 1541 N. Wells Street | | | Transaction ID : SASL2.37192 |
| Dity State | | Zip Code | Amount of Each Receipt this Period |
| Chicago | | 60610 | 2250.00 |
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| $^{ angle}$ DEMOCRATIC PART` | Y OF ILLING | DIS | | |
|---|---------------------------|-------------------|--|--|
| Full Name (Last, First, Middle Initial) / Full Organization Name Chicago Land Operators Joint Labor-Management PAC Account: 18789 | | | Date of Receipt | |
| Mailing Address 6200 Joliet Road | Account: 107 | U 3 | 10 08 2014 Transaction ID : SASL2.37219 | |
| City Countryside | State IL | Zip Code 60525 | Amount of Each Receipt this Period | |
| Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date | |
| Occupation | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi 3. Chicagoland Speedway, LLC | zation Name Account: 187 | 89 | Date of Receipt | |
| Mailing Address 500 Speedway Blvd. | 7,000 | | 10 03 2014 Transaction ID : SASL2.37196 Amount of Each Receipt this Period | |
| City Joliet | State IL | Zip Code 60433 | 1000.00 | |
| Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date | |
| Occupation | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi C. Citizens for Al Riley | | 18789 | Date of Receipt 10 22 2014 | |
| Mailing Address P.O. Box 282 | | | Transaction ID : SASL2.37707 Amount of Each Receipt this Period | |
| City Olympia Fields | State IL | Zip Code 60461 | 2500.00 | |
| Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date | |
| Occupation | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi Citizens for Cassidy | zation Name Account: | 18789 | Date of Receipt 10 01 2014 | |
| Mailing Address 5539 N. Broadway | | | Transaction ID : SASL2.37145 Amount of Each Receipt this Period | |
| City Chicago Name of Employer or Principal Place of Business | State IL | Zip Code 60640 | 3500.00 | |
| Occupation | | | Aggregate Year-to-Date | |
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| Fu | ll Name (Last, First, Middle Initial) / Full Organizatio | n Name | | Date of Receipt |
| | Citizens for Elizabeth Hernandez | Account : | 18789 | 09 25 2014 |
| Ma | ailing Address 2137 S. Lombard Avenue | | | Transaction ID : SASL2.37012 |
| _ | Suite 204 | | | Amount of Each Receipt this Period |
| Cit | | State | Zip Code | |
| | cero | IL | 60804 | 6000.00 |
| Na | me of Employer or Principal Place of Business | | | |
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| | | Account : | 18789 | 10 29 2014 |
| Ma | ailing Address P.O. Box 1214 | | | Transaction ID : SASL2.37728 |
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| | hicago | IL | 60690 | 2000.00 |
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| | Citizens for James D. Brosnahan | | | M M / D D / Y Y Y Y |
| | | Account | : 18789 | 09 26 2014 |
| Ma | ailing Address P.O. Box 718 | | | Transaction ID : SASL2.37066 |
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| | | Accour | nt: 18789 | 10 16 2014 |
| Ma | ailing Address P.O. Box 718 | | | Transaction ID : SASL2.37272 |
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| | ak Lawn | IL | 60453 | 500.00 |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Citizens for James D. Brosnahan Account: 18789 16 2014 Mailing Address P.O. Box 718 Transaction ID: SASL2.37666 Amount of Each Receipt this Period City State Zip Code Oak Lawn 60453 500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Citizens for James D. Brosnahan Account: 18789 2014 Mailing Address P.O. Box 718 Transaction ID: SASL2.37674 Amount of Each Receipt this Period City State Zip Code Oak Lawn IL 60453 -500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Citizens for Lou Lang Account: 18789 10 01 2014 Mailing Address P.O. Box 1815 Transaction ID: SASL2.37163 Amount of Each Receipt this Period City State Zip Code Skokie IL 60076 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Citizens for Sara Feigenholtz Account: 18789 24 2014 Mailing Address 3213 N. Wilton Avenue Unit A Transaction ID: SASL2.37712 Amount of Each Receipt this Period City State Zip Code 60657 IL 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date

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| DEMOCRATIC PARTY | OF | ILL | LINO | 4S |
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| / DEMOCRATIC PARTY | OF ILLINOIS | |
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| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | Date of Receipt |
| A. Citizens to Elect LaShawn Ford | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account: 18789 | 10 01 2014 |
| Mailing Address 5104 W. Chicago Avenue | | Transaction ID : SASL2.37151 |
| City | State Zip Code | Amount of Each Receipt this Period |
| Chicago | IL 60651 | 5000.00 |
| Name of Employer or Principal Place of Business | | 3000.00 |
| | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | Date of Receipt |
| B. Clayton Residential Home, Inc. | | M = M / D = D / Y = Y = Y |
| | Account: 18789 | 09 28 2014 |
| Mailing Address 2026 North Clark Street | | Transaction ID : SASL2.37101 |
| 011 | | Amount of Each Receipt this Period |
| City | State Zip Code | |
| Chicago Name of Employer or Principal Place of Business | IL 60614 | 6877.20 |
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| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | |
| C. Clifford Law Offices | aton Ivanic | Date of Receipt |
| or omitted bar offices | Account: 18789 | 09 28 2014 |
| Mailing Address 120 N. LaSalle, FI 31 | | Transaction ID : SASL2.37105 |
| 120 (1. 2004), 1. 0. | | Amount of Each Receipt this Period |
| City | State Zip Code | 7 thousand of Each Freedom time Ferrod |
| Chicago | IL 60602 | 10000.00 |
| Name of Employer or Principal Place of Business | | |
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| Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | Date of Receipt |
| D. Cogan & Power, P.C. | Account: 18789 | M M / D D / Y Y Y Y |
| Mailing Address 1 East Wacker Drive | Account : 16769 | 10 |
| | | Transaction ID : SASL2.37683 |
| Suite 510 City | State Zip Code | Amount of Each Receipt this Period |
| Chicago | IL 60601 | 10000.00 |
| Name of Employer or Principal Place of Business | | |
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| | DEMOCRATIC PARTY | | 1012 | |
|-----------|--|------------|------------|------------------------------------|
| | Il Name (Last, First, Middle Initial) / Full Organiz | | | Date of Receipt |
| | Committee for Rentention of Judges in Cook County Account: 18789 | | 10 17 2014 | |
| Ma | ailing Address 6009 W. Irving Park | | | Transaction ID : SASL2.37684 |
| | | | | Amount of Each Receipt this Period |
| Cit | | State | Zip Code | |
| | nicago | IL | 60634 | 150.00 |
| ıva | me of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
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| Jo | - Spacett | | | |
| | Il Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| | Committee to Elect Jay C. Hoffman | | | M M / D D / Y Y Y Y Y |
| | • | Account : | 18789 | 10 28 2014 |
| Ma | ailing Address P.O. Box 134 | | | Transaction ID : SASL2.37723 |
| _ | | | | Amount of Each Receipt this Period |
| Cit | | State | Zip Code | |
| | ollinsville | IL | 62234 | 10000.00 |
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| | II Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| . C | Continental Airlines | | | M = M / D = D / Y = Y = Y |
| _ | | Account : | 18789 | 10 14 2014 |
| Ma | ailing Address 1600 Smith Street | | | Transaction ID : SASL2.37263 |
| | | | | Amount of Each Receipt this Period |
| Cit | | State | Zip Code | , |
| | ouston | TX | 77002 | 500.00 |
| Na | me of Employer or Principal Place of Business | | | |
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| | Il Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
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| _ | | Account | t: 18789 | 09 28 2014 |
| Ma | ailing Address 33 North Dearborn | | | Transaction ID : SASL2.37106 |
| | | | | Amount of Each Receipt this Period |
| Cit | | State | Zip Code | |
| | nicago | IL | 60602 | 10000.00 |
| Na | me of Employer or Principal Place of Business | | | Assessed Maria |
| _ | | | | Aggregate Year-to-Date |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| Full Name (Last, First, Middle Initial) / Full Organization Name Cullen Haskins Nicholson & Menchetti, PC | | | Date of Receipt | |
|--|--------------|----------|--|--|
| | Account : | 18789 | 10 03 _ 2014 _ | |
| Mailing Address 10 s. LaSalle Street | | | Transaction ID : SASL2.37198 | |
| | | | Amount of Each Receipt this Period | |
| City | State | Zip Code | | |
| Chicago | IL | 60603 | 5000.00 | |
| Name of Employer or Principal Place of Business | | | Annuanta Vanta Data | |
| Occupation | | | Aggregate Year-to-Date | |
| Occupation | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi | ization Name | | Date of Receipt | |
| Daley and George, Ltd. | | | M M / D D / Y Y Y Y Y | |
| | Account : | 18789 | 10 17 2014 | |
| Mailing Address 20 S. Clark Street | | | Transaction ID : SASL2.37685 | |
| Suite 400 | | | Amount of Each Receipt this Period | |
| City | State | Zip Code | 7.000.00 0100 | |
| Chicago | IL | 60603 | 500.00 | |
| Name of Employer or Principal Place of Business | | | 7 | |
| | | | Aggregate Year-to-Date | |
| Occupation | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi | ization Name | | | |
| Decatur Manor Healthcare, LLC | Zanon Name | | Date of Receipt | |
| Dodda Marior Floatfiloare, LLO | Account : | 18789 | 09 28 2014 | |
| Mailing Address 1016 W. Pershing | , tooduit . | | | |
| To to W. I distilling | | | Transaction ID : SASL2.37107 | |
| City | State | Zip Code | Amount of Each Receipt this Period | |
| Decatur | IL | 62526 | 4220.00 | |
| Name of Employer or Principal Place of Business | i | | | |
| | | | Aggregate Year-to-Date | |
| Occupation | | | | |
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| Full Name (Last, First, Middle Initial) / Full Organi | ization Name | | Date of Receipt | |
| Democratic Party of Christian County | | | M M / D D / Y Y Y Y Y | |
| · | Account | t: 18789 | 11 01 2014 | |
| Mailing Address 201 W. Main Cross | | | Transaction ID : SASL2.37735 | |
| | | | Amount of Each Receipt this Period | |
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| Oity | IL | 62568 | 2000.00 | |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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| Full Name (Last, First, Middle Initial) / Full Or | ganization Name | Date of Receipt |
| A. Dr. Pepper Snapple Group | | M = M / D = D / Y = Y = Y |
| | Account: 18789 | 10 03 2014 |
| Mailing Address 5301 Legacy Drive | | Transaction ID : SASL2.37200 |
| | | Amount of Each Receipt this Period |
| City | | Code |
| Plano | TX 7502 | 250.00 |
| Name of Employer or Principal Place of Busin | ess | Assurante Vanuta Data |
| O | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Organization | ganization Name | Date of Receipt |
| B. Dudley & Lake, LLC | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account: 18789 | 09 28 2014 |
| Mailing Address 100 East Cook Ave, FI 2 | | Transaction ID: SASL2.37109 |
| City | State Zip | Amount of Each Receipt this Period |
| Libertyville | IL 6004 | 10 |
| Name of Employer or Principal Place of Busin | | 10000.00 |
| Traine of Employer of Frinapai Flage of Basin | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Org | ranization Nama | |
| C. Dunn Martin, Miller & Heathcoo | | Date of Receipt |
| o. Dann Martin, Miller & Heathleoc | Account: 18789 | 09 25 2014 |
| Mailing Address 15 W. Jefferson, Suite 300 | Account. 19799 | للنبا لنا لنا |
| 15 W. Jenerson, Julie 300 | | Transaction ID : SASL2.37004 |
| City | State Zip | Code Amount of Each Receipt this Period |
| Joliet | IL 6043 | 32 2500.00 |
| Name of Employer or Principal Place of Busin | ess | |
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| Full Name (Last, First, Middle Initial) / Full Or | ganization Name | Date of Receipt |
| D. Dynegy Administrative Services | | M M / D D / Y Y Y Y |
| | Account: 18789 | 10 12 2014 |
| Mailing Address 601 Travis, Suite 1400 | | Transaction ID : SASL2.37251 |
| | | Amount of Each Receipt this Period |
| City | | Code |
| Houston | TX 7700 | 5000.00 |
| Name of Employer or Principal Place of Busin | ess | |
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| | DEMOCRATIC PARTY | OF ILLIN | NOIS | |
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| | Full Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| A. | Education Management, LLC | | | M = M / D = D / Y = Y = Y |
| | • | Account : | 18789 | 10 01 2014 |
| | Mailing Address 210 Sixth Avenue | | | Transaction ID : SASL2.37149 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Pittsburg | PA | 15222 | 1000.00 |
| | Name of Employer or Principal Place of Business | | | |
| | Decumption | | | Aggregate Year-to-Date |
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| _ | Full Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| В. | Elm Creek Property Management | | 10700 | M = M / D = D / Y = Y = Y |
| | Mailing Address | Account : | 18789 | 10 03 2014 |
| | Mailing Address 1000 Remington Blvd. | | | Transaction ID : SASL2.37202 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | City Bolingbrook | State | 2ip Code 60440 | 1000.00 |
| | Name of Employer or Principal Place of Business | IL | JUTTU | 1000.00 |
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| | Full Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| C. | EMS Midwest, LLC | on ramo | | · |
| • | zwe mawoot, zzo | Account | : 18789 | 09 25 2014 |
| | Mailing Address 1401 Williams Boulevard | | | Transaction ID : SASL2.37006 |
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| | Springfield | IL | 62704 | 1000.00 |
| | Name of Employer or Principal Place of Business | | | |
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| | Full Name (Last, First, Middle Initial) / Full Organizati | | | Date of Receipt |
| D. | EXELON CORPORATION POLITICAL ACTION | N COMMITTEE (| EXELON PAC) | M M / D D / Y Y Y Y |
| | | Accour | t: 18789 | 10 16 2014 |
| | Mailing Address 101 CONSTITUTION AVENUE NW | | | Transaction ID : SASL2.37275 |
| | SUITE 400 EAST | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | WASHINGTON | DC | 20001 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Vear-to-Date |
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| | Full Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| | Exelon Generation Company | Account : | 18789 | 10 16 2014 |
| | Mailing Address 100 Constellation Way | | | Transaction ID : SASL2.37668 |
| | 0.1 | 0: : | 7:- 0 1 | Amount of Each Receipt this Period |
| | City | State MD | Zip Code 21202 | |
| | Baltimore Name of Employer or Principal Place of Business | טועו | 21202 | 10000.00 |
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| | Mailing Address 100 Constellation Way | | | 10 16 2014 |
| | 100 Sonstellation Way | | | Transaction ID : SASL2.37676 Amount of Each Receipt this Period |
| | City | State | Zip Code | Amount of Lacif Necelpt tills Fellod |
| | Baltimore | MD | 21202 | -10000.00 |
| | Name of Employer or Principal Place of Business | | | |
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| | Full Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| | Field of Dreams Enterprises, LLC | | | M = M / D = D / Y = Y = Y |
| | | Account | : 18789 | 09 25 2014 |
| | Mailing Address 350 N. Clark Street | | | Transaction ID : SASL2.37008 |
| | | | | Amount of Each Receipt this Period |
| | Chicago | State | Zip Code | |
| | Chicago Name of Employer or Principal Place of Business | IL | 60654 | 2000.00 |
| | Name of Employer of Philicipal Place of Business | | | |
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| | Finishing Trades of Chicago Corp PAC | alion Name | | Date of Receipt |
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| | Mailing Address 8700 W. Bryn Mawr Avenue | | | |
| | - 0700 W. BIYII Wawi Avenue | | | Transaction ID : SASL2.37713 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60631 | 10000.00 |
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| | DEMOCRATIC PARTY | | 1015 | |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | | | Date of Receipt |
| A. | Fletcher, O'Brien, Kasper & Nottage | | | M = M / D = D / Y = Y = Y |
| | NA-Year Address | Account : | 18789 | 10 16 2014 |
| | Mailing Address 222 North LaSalle | | | Transaction ID : SASL2.37276 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Chicago | IL | 60601 | 2500.00 |
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| | | Account : | 18789 | 10 16 2014 |
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| | Chicago | IL | 60601 | 2500.00 |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| D. | Foresight Energy Services | | | M = M / D = D / Y = Y = Y |
| | | Accoun | t: 18789 | 09 25 2014 |
| | Mailing Address 211 N. Broadway | | | Transaction ID : SASL2.37010 |
| ī | • | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | 200 100 100 100 100 100 100 100 100 100 |
| | St. Louis | MO | 63102 | 10000.00 |
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| | | Account : | 18789 | 09 25 2014 |
| Mailing Ac | ddress 211 N. Broadway | | | Transaction ID : SASL2.37011 |
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| St. Louis | Tanala and Drive in all Diagonal Drive in a | МО | 63102 | 1000.00 |
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| Mailing Ac | ldress 211 N. Broadway | Account : | 16769 | 09 25 2014 |
| Wanning 7 to | 211 N. Broadway | | | Transaction ID : SASL2.37657 |
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| St. Louis | | MO | 63102 | -1000.00 |
| Name of I | Employer or Principal Place of Busines | S | | 1000.00 |
| | | | | Aggregate Year-to-Date |
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| Full Name | (Last, First, Middle Initial) / Full Organ | nization Name | | Date of Receipt |
| | ls for Larry Walsh | | | M = M / D = D / Y = Y = Y |
| | • | Account | : 18789 | 09 28 2014 |
| Mailing Ac | ldress P.O. Box 69 | | | Transaction ID : SASL2.37140 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Elwood | | IL | 60421 | 9000.00 |
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| Full Name | (Lost First Middle Initial) / Full Over | nization Nama | | |
| | e (Last, First, Middle Initial) / Full Organ for Monique Davis | lization Name | | Date of Receipt |
| D. Trichas | Tor Mornique Bavio | Accoun | t: 18789 | 09 26 2014 |
| Mailing Ac | ddress 2147 West 107th Street | | | |
| | 2147 West 107th Sheet | | | Transaction ID : SASL2.37069 Amount of Each Receipt this Period |
| City | | State | Zip Code | Amount of Each Necept this Feriod |
| Chicago | | IL | 60643 | 9000.00 |
| Name of I | Employer or Principal Place of Busines | S | | |
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Use separate schedule(s) for each category of the Aggregation Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Friends for State Rep. Account: 18789 01 2014 Mailing Address 66 East 24th Street Transaction ID: SASL2.37147 Amount of Each Receipt this Period City State Zip Code Chicago Heights 60411 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Friends of Arthur Turner Account: 18789 2014 Mailing Address 3849 W. Ogden Avenue Transaction ID: SASL2.37709 Amount of Each Receipt this Period City State Zip Code Chicago IL 60623 8000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt c. Friends of Camille Lilly Account: 18789 10 2014 14 Mailing Address 7115 W. North Avenue Transaction ID: SASL2.37266 Amount of Each Receipt this Period City State Zip Code Oak Park IL 60302 8000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Friends of Christian Mitchell Account: 18789 25 2014 Mailing Address P.O. Box 805167 Transaction ID: SASL2.37033 Amount of Each Receipt this Period City State Zip Code 60680 IL 10000.00 Name of Employer or Principal Place of Business

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Aggregate Year-to-Date

Occupation

Use separate schedule(s) for each category of the Aggregation Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| NAME | OF | COMMITTEE | (In | Full) |
|------|----|-----------|-----|-------|
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|---------------------------------------|-----------------------------------|------------------|-----------|------------------------------------|
| • | ddle Initial) / Full Organization | Name | | Date of Receipt |
| A. Friends of Elgie S | | Account : | 18789 | 10 24 2014 |
| Mailing Address 8142 A S. | Pririe Park Place | | | Transaction ID : SASL2.37719 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Chicago | sinal Diago of Dissipage | IL | 60619 | 3000.00 |
| Name of Employer or Prin | icipal Place of Business | | | Assessed Versite Date |
| Occupation | | | | Aggregate Year-to-Date |
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| Friends of Fran Hur | ley | | | M = M / D = D / Y = Y = Y |
| A | | Account : | 18789 | 10 28 2014 |
| Mailing Address 3215 W. 1 | 111th Street | | | Transaction ID : SASL2.37724 |
| 0.1 | | 01 : | 7: 0 : | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Chicago Name of Employer or Prin | using Place of Pusings | IL | 60655 | 3500.00 |
| Name of Employer or Prin | icipal Place of Business | | | |
| O a a un a bi a un | | | | Aggregate Year-to-Date |
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| | ddle Initial) / Full Organization | Name | | Date of Receipt |
| C. Friends of John E | Bradley | | | M = M / D = D / Y = Y = Y |
| | | Account | : 18789 | 09 26 2014 |
| Mailing Address P.O. Draw | ver 488 | | | Transaction ID : SASL2.37064 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Marion | einal Diago of Division | IL | 62969 | 10000.00 |
| Name of Employer or Prin | icipal Place of Business | | | |
| | | | | Aggregate Year-to-Date |
| Occupation | | | | |
| | | | | |
| | ddle Initial) / Full Organization | Name | | Date of Receipt |
|). Friends of Kelly Burk | 9 | | | M M / D D / Y Y Y Y |
| Mailing Address | | Accour | nt: 18789 | 09 28 2014 |
| Mailing Address 9543 Cent | ral Park Avenue | | | Transaction ID : SASL2.37097 |
| 011 | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Evergreen Park | spinal Diago of Desciones | IL | 60805 | 7000.00 |
| Name of Employer or Prin | icipai Piace of Business | | | Assuranta Vacuta Data |
| O | | | | Aggregate Year-to-Date |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Friends of Laura for State Rep. Account: 18789 26 2014 Mailing Address 1700 Constitution Drive Transaction ID: SASL2.37070 Amount of Each Receipt this Period City State Zip Code Glenview 60026 2500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Friends of Linda Chapa Lavia Account: 18789 2014 Mailing Address 149 S. Fourth Street Transaction ID: SASL2.37067 Amount of Each Receipt this Period City State Zip Code Aurora IL 60505 4000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Friends of Michael Alvarez Account: 18789 09 26 2014 Mailing Address 6120 N. Kirkwood Avenue Transaction ID: SASL2.37062 Amount of Each Receipt this Period City State Zip Code Chicago IL 60646 1500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Friends of Natalie Manley Account: 18789 01 2014 Mailing Address 3107 Ingalls Avenue Transaction ID: SASL2.37739 Apt. 3A Amount of Each Receipt this Period City State Zip Code 60435 IL 9000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 17000.00 SUBTOTAL of Receipts This Page (optional).....

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Use separate schedule(s) for each category of the Aggregation Page

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| NAME OF COMMITTEE (In Full) | |
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| Criondo of Dita Moufield | ization Name | | Date of Receipt |
|--|----------------|-------------|--|
| Friends of Rita Mayfield | Account : | 18789 | 11 01 2014 |
| Mailing Address 649 S. Fulton Avenue | | | Transaction ID : SASL2.37740 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Waukegan | IL | 60085 | 2000.00 |
| Name of Employer or Principal Place of Business | , | | Access to Versita Patri |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| Friends of Robyn Gabel | | | M = M / D = D / Y = Y = Y |
| • | Account : | 18789 | 10 29 2014 |
| Mailing Address 905 Forest Avenue | | | Transaction ID : SASL2.37727 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | Tandari Gr Eddir Hoodipt tillo i Gilot |
| Evanston | IL | 60202 | 8500.00 |
| Name of Employer or Principal Place of Business | ; | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full Organ | ization Nama | | |
| Gabriel Lopez and Associates | izauon name | | Date of Receipt |
| Capitel Lopez alla Associates | Account : | 18789 | M = M / D = D / Y = Y = Y = Y |
| Mailing Address 3108 West Irving Park Road | ACCOUNT: | 10709 | 10 16 2014 |
| 3108 West Irving Park Road | | | Transaction ID : SASL2.37277 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | IL | 60618 | 1000.00 |
| Name of Employer or Principal Place of Business | 3 | | 1000.00 |
| , | | | Aggregate Year-to-Date |
| Occupation | | | 55 15 11 11 11 11 11 |
| • | | | |
| Full Name (Last, First, Middle Initial) / Full Organ | ization Name | | |
| Gabriel Lopez and Associates | LAUVII INAIIIG | | Date of Receipt |
| Capitor Lopoz and Adodolated | Accoun | t: 18789 | 10 16 2014 |
| Mailing Address 3108 West Irving Park Road | 7.030411 | | 7 Lil Lil Lil |
| S 100 West Irving Park Road | | | Transaction ID : SASL2.37671 |
| | State | Zip Code | Amount of Each Receipt this Period |
| City | | 60618 | 1000.00 |
| City Chicago | IL | | 1000.00 |
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| Chicago | | | Aggregate Year-to-Date |
| Chicago | | | Aggregate Year-to-Date |
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Use separate schedule(s) for each category of the Aggregation Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Gabriel Lopez and Associates Account: 18789 16 2014 Mailing Address 3108 West Irving Park Road Transaction ID: SASL2.37678 Amount of Each Receipt this Period City State Zip Code Chicago 60618 -1000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC) Account: 18789 2014 Mailing Address 1299 PENNSYLVANIA AVE NW Transaction ID: SASL2.37252 SUITE 900 Amount of Each Receipt this Period City State Zip Code WASHINGTON DC 20004 2500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Goldberg Weisman & Cairo, Ltd. Account: 18789 10 08 2014 Mailing Address One E. Wacker Drive Transaction ID: SASL2.37221 Amount of Each Receipt this Period City State Zip Code Chicago IL 60601 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt

D. Grain & Feed Legislative Council Account: 18789 28 2014 Mailing Address 3521 Hollis Drive Transaction ID: SASL2.37110 Amount of Each Receipt this Period City State Zip Code 62711 IL 200.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| / DEMO | OCRATIC PART | Y OF ILLIN | IOIS | |
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| • | ast, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| | re Place, LLC | Account : | 18789 | 09 28 2014 |
| Mailing Addre | ess 4621 North Sheridan Road | | | Transaction ID : SASL2.37112 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Chicago | ployer or Principal Place of Business | IL . | 60640 | 3750.00 |
| Name of Em | ployer or Fillicipal Flace of Busiliess | | | Aggregate Year-to-Date |
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| Occupation | | | | |
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| B. Grasmere | e Place, LLC | Account . | 10700 | M = M / D = D / Y = Y = Y |
| Mailing Addre | 299 | Account : | 16769 | 09282014 |
| maining madri | 4621 North Sheridan Road | | | Transaction ID : SASL2.37114 |
| City | | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | | IL | 60640 | 6250.00 |
| • | ployer or Principal Place of Business | | | 6250.00 |
| | | | | Aggregate Year-to-Date |
| Occupation | | | | |
| • | | | | |
| Full Name (I | ast, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| | ood Care, Inc. | | | |
| 2.00 | | Account : | 18789 | 09 28 2014 |
| Mailing Addre | ess 1406 North Chicago Avenue | | | Transaction ID : SASL2.37115 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | Table 1 - Last 1 - La |
| Evanston | | IL | 60201 | 4190.00 |
| Name of Em | ployer or Principal Place of Business | <u> </u> | | |
| | | | | Aggregate Year-to-Date |
| Occupation | | | | |
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| | ast, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| D. Grisko, LL | .C | | | M = M / D = D / Y = Y = Y |
| Madica Add | | Accoun | t: 18789 | 10 16 2014 |
| Mailing Addre | ess 410 N. Michigan Avenue | | | Transaction ID : SASL2.37279 |
| | | C: : | 7:- 0 ! | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Chicago | ployer or Principal Place of Business | IL. | 60611 | 2500.00 |
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Grisko, LLC Account: 18789 16 2014 Mailing Address 410 N. Michigan Avenue Transaction ID: SASL2.37672 Amount of Each Receipt this Period City State Zip Code Chicago 60611 2500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Grisko, LLC Account: 18789 2014 16 Mailing Address 410 N. Michigan Avenue Transaction ID: SASL2.37679 Amount of Each Receipt this Period Zip Code City State Chicago IL 60611 -2500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. H.W. Lochner, Inc. Account: 18789 10 2014 17 Mailing Address 20 North Wacker Drive Transaction ID: SASL2.37686 Suite 1200 Amount of Each Receipt this Period City State Zip Code Chicago IL 60606 1250.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. HACIA, PAC Account: 18789 17 2014 Mailing Address 650 W. Lake Street Transaction ID: SASL2.37687 Amount of Each Receipt this Period City State Zip Code 60661 IL 2500.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 3750.00 SUBTOTAL of Receipts This Page (optional).....

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| DEMOCRATIC PART | | 15 | |
|---|------------------------|-------------------|---------------------------------------|
| Full Name (Last, First, Middle Initial) / Full Org | anization Name | | Date of Receipt |
| Hawthorne Race Course, Inc. | Account : 18789 | | 09 26 2014 |
| Mailing Address 3501 South Laramie Avenue | | | Transaction ID : SASL2.37072 |
| Other | 01. | 71: 0: 1 | Amount of Each Receipt this Period |
| City Cicero | State IL | Zip Code 60804 | |
| Name of Employer or Principal Place of Busine | | 00004 | 500.00 |
| Tramo of Employer of Efficipal Flace of Dustile | ,,,, | | Aggregate Year-to-Date |
| Occupation | | | , agrogato roar to bate |
| Cooupation | | | |
| Full Name (Last, First, Middle Initial) / Full Org | anization Name | | Date of Receipt |
| HBK Engineering, LLC | | | M = M / D = D / Y = Y = Y |
| | Account: 18789 |) | 10 16 2014 |
| Mailing Address 921 West Van Buren | | | Transaction ID : SASL2.37281 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
| Chicago | IL | 60607 | 500.00 |
| Name of Employer or Principal Place of Busine | ess | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
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| HBK Engineering, LLC | anzalion Name | | Date of Receipt |
| TIDIT ETIGITIESTING, ELO | Account: 19 | 789 | M = M / D = D / Y = Y = Y |
| Mailing Address 921 West Van Buren | Account: 18 | 103 | 10 16 2014 |
| 921 West Van Buren | | | Transaction ID : SASL2.37673 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | IL | 60607 | 500.00 |
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| HBK Engineering, LLC | A 2221111 : 4 | 0700 | M = M / D = D / Y = Y = Y |
| Mailing Address 921 West Van Buren | Account: 1 | 8789 | 10 16 2014 |
| Mailing Address 921 West Van Buren | | | Transaction ID : SASL2.37680 |
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| City Chicago | State | Zip Code 60607 | |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt A. Health Care Council of IL PAC Account: 18789 24 2014 Mailing Address 1149 W. Edwards, Suite C Transaction ID: SASL2.37715 Amount of Each Receipt this Period City State Zip Code Springfield 62704 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Health Care Service Corporation Employees PAC Account: 18789 2014 Mailing Address 300 East Randolph Transaction ID: SASL2.37283 Amount of Each Receipt this Period Zip Code City State Chicago IL 60601 10000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Heplerbroom, LLC Account: 18789 09 25 2014 Mailing Address 130 N. Main Street Transaction ID: SASL2.37658 Amount of Each Receipt this Period City State Zip Code Edwardsville IL 62025 1000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Herbalife Account: 18789 2014 Mailing Address 990 West 490 Street Transaction ID: SASL2.37264 Amount of Each Receipt this Period City State Zip Code 90502 CA 1000.00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation 22000.00 SUBTOTAL of Receipts This Page (optional).....

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| | DEMOCRATIC PARTY | OF ILLIN | NOIS | |
|-----|---|-------------|-------------------|------------------------------------|
| | Full Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| Α. | Horwitz Horwitz & Associates, Ltd. | | 09 28 2014 | |
| | Mailing Address 25 East Washington | | | Transaction ID : SASL2.37117 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Chicago | IL | 60602 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Veer to Dete |
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| _ | Full Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| В. | Houlihan Campaign Fund | | | M = M / D = D / Y = Y = Y |
| | McCon Addison | Account : | 18789 | 10 09 2014 |
| | Mailing Address 2409 Country Club Drive | | | Transaction ID : SASL2.37240 |
| | 011 | 01 | 7:- 0 1 | Amount of Each Receipt this Period |
| | City Springfield | State | Zip Code | |
| | Name of Employer or Principal Place of Business | IL | 62704 | 5000.00 |
| | Name of Employer of Principal Place of Business | | | Assessed Newsta Bata |
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| _ | Full Name (Last, First, Middle Initial) / Full Organizati | | | Date of Receipt |
| C. | Howard Kenner Government Consu | • | | M = M / D = D / Y = Y = Y |
| | Mailing Address | Account | : 18789 | 10 16 2014 |
| | Mailing Address 727 East 60th Street | | | Transaction ID : SASL2.37284 |
| | 0'' | | 7: 0 ! | Amount of Each Receipt this Period |
| | City Chicago | State IL | Zip Code 60637 | |
| | Name of Employer or Principal Place of Business | IL . | 00037 | 500.00 |
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| υ. | Humana | A | 40700 | M = M / D = D / Y = Y = Y |
| | Mailing Address | Accour | nt: 18789 | 10 01 2014 |
| | Mailing Address P.O. Box 740083 | | | Transaction ID : SASL2.37153 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Louisville | KY | 40201 | 0000.00 |
| | Name of Employer or Principal Place of Business | IVI | 10201 | 2000.00 |
| | | | | Aggregate Year-to-Date |
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| | DEMOCRATIC PARTY | | NOIS | |
|----|--|-----------|--|--|
| | ull Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| | Human Rights Campaign | Account : | 18789 | 11 01 2014 |
| Λ | lailing Address 1640 Rhode Island Avenue NW | | | Transaction ID : SASL2.37736 |
| _ | | | | Amount of Each Receipt this Period |
| | ity | State | Zip Code | |
| | Vashington | DC | 20036 | 10000.00 |
| N | ame of Employer or Principal Place of Business | | | A Versite Dete |
| 7 | | | | Aggregate Year-to-Date |
| (| ccupation | | | |
| | | | | |
| | ull Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| 8. | berdrola Renewables, Inc. | | | M = M / D = D / Y = Y = Y |
| - | Initian Address | Account : | 18789 | 10 08 2014 |
| ۱۱ | ailing Address 1125 NW Couch | | | Transaction ID : SASL2.37223 |
| = | u | | 7: 0 : | Amount of Each Receipt this Period |
| | ity Portland | State | Zip Code | |
| | ame of Employer or Principal Place of Business | OR | 97209 | 2500.00 |
| 1\ | ame от Етпроует от Етпорат Place от business | | | Assuranta Vanta Data |
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| _ | ull Name (Leet Eiret Middle Initial) / Full Conscient | on Nomo | | D. (D.) |
| | ull Name (Last, First, Middle Initial) / Full Organizati BEW Local 134 PAC | on Name | | Date of Receipt |
| • | IDEVV LUCAL 134 FAC | A 2001:24 | : 18789 | M = M / D = D / Y = Y = Y |
| Ī | lailing Address 600 W. Washington Boulevard | Account | . 10705 | 10 29 2014 |
| ., | 600 vv. washington Boulevard | | | Transaction ID : SASL2.37729 |
| 7 | ity | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60661 | 10000.00 |
| N | ame of Employer or Principal Place of Business | | | 1000.00 |
| | | | | Aggregate Year-to-Date |
| 7 | ccupation | | | |
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| F | ull Name (Last, First, Middle Initial) / Full Organizati | on Name | | Date of Receipt |
| | CHP Pharmacy Action Fund | | | M M / D D / Y Y Y |
| | · | Accou | nt: 18789 | 10 22 2014 |
| N | lailing Address 4430 Manchester Drive | | | Transaction ID : SASL2.37701 |
| | | | | Amount of Each Receipt this Period |
| C | ity | State | Zip Code | , another of Edul Hoodipt this I chied |
| ı | Rockford | IL | 61109 | 1000.00 |
| N | ame of Employer or Principal Place of Business | | | |
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Use separate schedule(s) for each category of the Aggregation Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| , , , , | Name (Last, First, Middle Initial) / Full Organization Name | |
|--|---|------------------------------------|
| ICMOA PAC | Account : 18789 | 10 12 2014 |
| Mailing Address 3201 Old Jacksonville Road | | Transaction ID : SASL2.37253 |
| | | Amount of Each Receipt this Period |
| City | State Zip Code | |
| Springfield Name of Employer or Principal Place of Business | IL 62711 | 10000.00 |
| Name of Employer or Principal Place of Business | | Aggregate Year-to-Date |
| Occupation | | . iggrogate rear to-Date |
| | | |
| Full Name (Last First Middle Initial) / Full Occurs | ization Nama | Date of Passint |
| Full Name (Last, First, Middle Initial) / Full Organ Illinois Energy Association | LAUON NAME | Date of Receipt |
| oio Eriorgy / issuciation | Account : 18789 | M = M / D = D / Y = Y = Y |
| Mailing Address 1 W. Old State Capitol Plaza | | 10 01 2014 |
| - ı w. Olu State Capitol Plaza | | Transaction ID : SASL2.37155 |
| City | State Zip Code | Amount of Each Receipt this Period |
| Springfield | IL 62701 | 2500.00 |
| Name of Employer or Principal Place of Business | ; | |
| | | Aggregate Year-to-Date |
| Occupation | | |
| E 11 N | | |
| Full Name (Last, First, Middle Initial) / Full Organ | | Date of Receipt |
| Illinois Federation of Teachers CC | - | M = M / D = D / Y = Y = Y |
| Mailing Address 500 Oakmont Lane | Account : 18789 | 10 28 2014 |
| 500 Oakmont Lane | | Transaction ID : SASL2.37725 |
| City | State Zip Code | Amount of Each Receipt this Period |
| Westmont | IL 60559 | 10000.00 |
| Name of Employer or Principal Place of Business | | 1000.00 |
| | | Aggregate Year-to-Date |
| Occupation | | |
| | | |
| Full Name (Last, First, Middle Initial) / Full Organ | ization Name | Date of Receipt |
| Illinois Film PAC | | M M / D D / Y Y Y Y Y |
| | Account: 18789 | 09 26 2014 |
| Mailing Address 15301 Ventura Boulevard | | Transaction ID : SASL2.37074 |
| | | Amount of Each Receipt this Period |
| | State Zip Code | |
| | | 0500.00 |
| Shereman Oaks | CA 91403 | 2500.00 |
| Shereman Oaks | CA 91403 | 7 |
| City Shereman Oaks Name of Employer or Principal Place of Business Occupation | CA 91403 | |
| Shereman Oaks Name of Employer or Principal Place of Business | CA 91403 | |
| Shereman Oaks Name of Employer or Principal Place of Business | CA 91403 | Aggregate Year-to-Date |

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| | EMOCRATIC PARTY | | <u> </u> | |
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| | Il Name (Last, First, Middle Initial) / Full Organiza | | | Date of Receipt |
| Illinois Fire Sprinkler Contractors PAC Account: 18789 | | 09 25 2014 | | |
| Ma | ailing Address 62 Orland Square Drive | | | Transaction ID : SASL2.37013 |
| _ | | | | Amount of Each Receipt this Period |
| Ci | | State | Zip Code | |
| | land Park | IL | 60462 | 250.00 |
| IVi | me of Employer or Principal Place of Business | | | Aggregate Veer to Date |
| ~ | augustion. | | | Aggregate Year-to-Date |
| O | cupation | | | |
| | | | | |
| | Il Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
| II | linois Health Care Association PAC | | | M = M / D = D / Y = Y = Y |
| | 20 | Account : | 18789 | 10 03 2014 |
| IVI | ailing Address 1029 South 4th Street | | | Transaction ID : SASL2.37204 |
| | | | 7 . 0 . | Amount of Each Receipt this Period |
| Ci | • | State | Zip Code | |
| | pringfield | IL | 62703 | 10000.00 |
| INa | me of Employer or Principal Place of Business | | | |
| _ | P | | | Aggregate Year-to-Date |
| O | cupation | | | |
| | | | | |
| | II Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
| I | linois Laborers Legislative | | | M = M / D = D / Y = Y = Y |
| _ | | Account | : 18789 | 10 22 2014 |
| Ma | ailing Address 1 N. Old State Capitol Plaza | | | Transaction ID : SASL2.37702 |
| _ | | | | Amount of Each Receipt this Period |
| Ci | • | State | Zip Code | |
| | pringfield | IL | 62701 | 10000.00 |
| Na | me of Employer or Principal Place of Business | | | |
| _ | | | | Aggregate Year-to-Date |
| O | cupation | | | |
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| | ll Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
| Ш | inois Land Title Association, PAC | | | M = M / D = D / Y = Y = Y |
| _ | | Accour | nt: 18789 | 09 25 2014 |
| Ma | ailing Address 225 East Cook Street | | | Transaction ID : SASL2.37015 |
| _ | | | | Amount of Each Receipt this Period |
| Ci | | State | Zip Code | |
| | pringfield | IL | 62704 | 450.00 |
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| JB | TOTAL of Receipts This Page (optional) | | <u> </u> | 20700.00 |

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| DE | MOCRATIC PARTY | OF ILLIN | NOIS | |
|---------------------|---|------------|-------------------|------------------------------------|
| Full Na | me (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| A. Illino | Illinois League of Financial Institutions PEC Account: 18789 | | | M = M / D = D / Y = Y = Y |
| | | | | 10 01 2014 |
| Mailing | Address 133 South 4th Street | | | Transaction ID : SASL2.37157 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Springfi | | IL | 62701 | 1000.00 |
| name o | of Employer or Principal Place of Business | | | Aggregate Veer to Date |
| 0 | K a a | | | Aggregate Year-to-Date |
| Occupa | lion | | | |
| Full No. | me (Last, First, Middle Initial) / Full Organiz | otion Namo | | |
| | is Normal | ation Name | | Date of Receipt |
| D. IIIII 101 | 3 Normal | Account : | 18780 | M = M / D = D / Y = Y = Y |
| Mailing | Address 1321 N Milwaukee Avenue | Account. | 10703 | 09252014 |
| . 3 | 1321 N. Milwaukee Avenue | | | Transaction ID : SASL2.37017 |
| City | | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | 0 | IL | 60622 | 150.00 |
| Name of | of Employer or Principal Place of Business | | | 100.00 |
| | | | | Aggregate Year-to-Date |
| Occupa | tion | | | |
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| Full Na | me (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| C. Illino | ois Occupational Therapists PA | (C | | M = M / D = D / Y = Y = Y |
| | · | Account | : 18789 | 09 28 2014 |
| Mailing | Address 5038 N. Winthrop Avenue | | | Transaction ID : SASL2.37119 |
| | | | | Amount of Each Receipt this Period |
| City | | State | Zip Code | |
| Chicago | | IL | 60640 | 150.00 |
| Name o | of Employer or Principal Place of Business | | | |
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| Occupa | tion | | | |
| | | | | |
| | me (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| D. Illinois | s Podiatric Medical Assn. PAC | | | M M / D D / Y Y Y Y |
| Mailing | Addroso | Accour | nt: 18789 | 10 01 2014 |
| iviaiiiig | Address P.O. Box 251 | | | Transaction ID : SASL2.37159 |
| City | | State | Zip Code | Amount of Each Receipt this Period |
| City Springfi | eld | IL | 2ip Code 62705 | |
| | of Employer or Principal Place of Business | IL . | 02703 | 5000.00 |
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| 0.000 | | | | |
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| NAME OF COMMITTEE (In Full) | |
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| / DEMOCRATIC PAR | | IOIS | | |
|---|------------------|-------------------|--|--|
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt | |
| A. Illinois Restaurant Association | Account: 18789 | | M M / D D / Y Y Y Y Y 10 22 2014 | |
| Mailing Address 33 West Monroe | | | Transaction ID : SASL2.37703 | |
| City | Ctoto | Zin Cada | Amount of Each Receipt this Period | |
| City Chicago | State IL | Zip Code 60603 | FF00 50 | |
| Name of Employer or Principal Place of Busi | | | 5500.00 | |
| Traine of Employer of Filliopal Flago of Basi | 11000 | | Aggregate Year-to-Date | |
| Occupation | | | riggregate roal to Date | |
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| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | | |
| B. Illinois Restaurateurs PAC | rganization Name | | Date of Receipt | |
| B. Immole restaurateurs i 718 | Account : | 18789 | 10 22 2014 | |
| Mailing Address 33 W. Monroe Street | | | | |
| oo W. Mornoo Chook | | | Transaction ID : SASL2.37704 Amount of Each Receipt this Period | |
| City | State | Zip Code | 7.1.10unt of Each Flodelpt this Fellou | |
| Chicago | IL | 60603 | 4800.00 | |
| Name of Employer or Principal Place of Business | ness | | | |
| | | | Aggregate Year-to-Date | |
| Occupation | | | | |
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| Full Name (Last, First, Middle Initial) / Full O | | | Date of Receipt | |
| C. Illinois Surgical Assistant Asso | ciation | | M = M / D = D / Y = Y = Y | |
| Mailing Address | Account : | 18789 | 09 25 2014 | |
| Mailing Address 9211 Waterfall Glen Boulevard | | | Transaction ID : SASL2.37019 | |
| City | State | Zip Code | Amount of Each Receipt this Period | |
| Darien | State IL | 21p Code 60561 | 250.00 | |
| Name of Employer or Principal Place of Busi | | | 250.00 | |
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| Occupation | | | 35 15 11 11 11 11 | |
| | | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt | |
| D. Illinois Transportation Trade Associate | | | M M / D D / Y Y Y Y | |
| · | Account | : 18789 | 10 17 2014 | |
| Mailing Address 3351 W. Addison Street | | | Transaction ID : SASL2.37688 | |
| | | | Amount of Each Receipt this Period | |
| City | State | Zip Code | | |
| Chicago | IL | 60618 | 10000.00 | |
| Name of Employer or Principal Place of Busi | ness | | Annual value Date | |
| Occupation | | | Aggregate Year-to-Date | |
| Occupation | | | | |
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| SUPTOTAL of Descints This Desc (entional) | | | 20550.00 | |
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| | ny information copied from such Reports and Statement for commercial purposes, other than using the name a | | | | |
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| $\left. \right\rangle$ | NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY | | NOIS | | |
| | Full Name (Last, First, Middle Initial) / Full Organization | on Name | | Date of Receipt | |
| Α. | | Account : | 18789 | 10 12 | 2014 |
| | Mailing Address 534 S. 2nd Street | | | Transaction ID : SASL2.37 | 255 |
| | | | | Amount of Each Receipt | this Period |
| | City | State | Zip Code | | |
| | Springfield | IL | 62701 | | 2600.00 |
| | Name of Employer or Principal Place of Business | | | 7 | |
| | | | | Aggregate Year-to-Date | |
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| | Full Name (Last, First, Middle Initial) / Full Organization | an Nama | | , , | |
| D | Independent Finance PAC | on Name | | Date of Receipt | |
| D. | independent Finance FAC | A | 40700 | M = M / D = D / | Y = Y = Y |
| | Mailing Address 4410 N. Rayenswood | Account : | 18789 | 10 03 | 2014 |
| | 4410 N. Ravenswood | | | Transaction ID : SASL2.37 | 206 |
| | | | | Amount of Each Receipt | this Period |
| | City | State | Zip Code | | |
| | Chicago | IL | 60640 | | 1000.00 |
| | Name of Employer or Principal Place of Business | | | , , , , , , , | |
| | | | | Aggregate Year-to-Date | |
| | Occupation | | | | |
| | | | | | 1 1 10 |
| _ | Full Name (Last, First, Middle Initial) / Full Organization | on Name | | Date of Receipt | |
| C. | Inland Real Estate Group, Inc. | | | · · | V - V - V - V |
| • | Account: 18789 | | | 09 25 | 2014 |
| | Mailing Address 2901 Butterfield Road | 7,0004.11 | | ا لنسا لنسا ا | |
| | 2301 Butterneid Road | | | Transaction ID : SASL2.37 | |
| | City | State | Zip Code | Amount of Each Receipt | this Period |
| | Oak Brook | IL | 60523 | | 450.00 |
| | Name of Employer or Principal Place of Business | | | | 150.00 |
| | Traine of Employer of Filliopal Flace of Business | | | Aggregate Veer to Date | |
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| D. | Intren | | | M M / D D / | Y Y Y |
| | | Accour | nt: 18789 | 10 08 | 2014 |
| | Mailing Address 18202 West Union Road | | | Transaction ID : SASL2.37 | 225 |
| | | | | Amount of Each Receipt | |
| | City | State | Zip Code | 7 anount of Euch Hessipt | tillo i cilod |
| | Union | IL | 60180 | | 1500.00 |
| | Name of Employer or Principal Place of Business | | | | - T- |
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| s | SUBTOTAL of Receipts This Page (optional) | | | | 5250.00 |
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| | ny information copied from such Reports and Statement for commercial purposes, other than using the name a | | | |
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| | NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY (| | NOIS | |
| | Full Name (Last, First, Middle Initial) / Full Organization | n Name | | Date of Receipt |
| Α. | Invenergy, LLC | Account : | 18789 | 10 03 2014 |
| | Mailing Address One S. Wacker Drive | | | Transaction ID : SASL2.37208 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Chicago | IL | 60606 | 5000.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
| | Occupation | | | |
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| | Full Name (Last, First, Middle Initial) / Full Organization | n Name | | Date of Receipt |
| В. | Ironworkers Political Action League | | | M M / D D / Y Y Y Y |
| | | Account : | 18789 | 10 16 2014 |
| | Mailing Address 1750 New York Avenue N.W. | | | Transaction ID : SASL2.37285 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Washington | DC | 20006 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
| | Occupation | | | riggregate real to Bate |
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| | Full Name (Last, First, Middle Initial) / Full Organization | n Name | | Date of Receipt |
| C | John McCabe & Associates | ii itailie | | · |
| ٠. | Com Mocaso a Accordatos | Account | : 18789 | 09 25 2014 |
| | Mailing Address 7133 W. Higgins Avenue | | | المستنبا لنبا لنبا |
| | - 7100 W. Higgins / Wende | | | Transaction ID : SASL2.37023 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60656 | 1000.00 |
| | Name of Employer or Principal Place of Business | | | |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
| | | | | |
| | Full Name (Last, First, Middle Initial) / Full Organization | n Name | | Date of Receipt |
| D. | JTS Marketing and Consulting | | | M M / D D / Y Y Y Y |
| | | Accou | nt: 18789 | 09 25 2014 |
| | Mailing Address 7730 W. Belden Avenue | | | Transaction ID : SASL2.37025 |
| | | | | Amount of Each Receipt this Period |
| | City | State | Zip Code | |
| | Elmwood Park | IL | 60707 | 500.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
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| s | SUBTOTAL of Receipts This Page (optional) | | > | 16500.00 |

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| Kat | ten Muchin & Zavis a Partnershi | • | 4.0=0.0 | M = M / D = D / Y = Y = Y |
| Mailin | a Address | Account : | 18789 | 09 |
| iviaiiii | g Address 525 West Monroe Street | | | Transaction ID : SASL2.37121 |
| City | | State | Zip Code | Amount of Each Receipt this Period |
| Chicag | qo | IL | 60661-3693 | 2500.00 |
| | of Employer or Principal Place of Business | | | - |
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| Full N | lame (Last, First, Middle Initial) / Full Organia | zation Name | | Date of Receipt |
| | ac Consulting, LLC | | | M = M / D = D / Y = Y = Y |
| | | Account : | 18789 | 10 16 2014 |
| Mailin | g Address 14001 William Drive | | | Transaction ID : SASL2.37286 |
| | | _ | | Amount of Each Receipt this Period |
| City | d Dade | State | Zip Code | |
| | d Park | IL | 60462 | 500.00 |
| ivame | of Employer or Principal Place of Business | | | Access to Veneta D. |
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| | urtnie Nicole Corp. | zation ivame | | Date of Receipt |
| 1100 | driftle Medic Corp. | Account | : 18789 | 11 01 2014 |
| Mailing | g Address 6127 S. Woodlawn Avenue | rioddin | | |
| | Apt. C | | | Transaction ID : SASL2.37737 Amount of Each Receipt this Period |
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| Chica | go | IL | 60637 | 1000.00 |
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| Kour | rtnie Nicole Corp. | | | M = M / D = D / Y = Y = Y |
| Mailie | a Address | Accoun | nt: 18789 | 11 01 2014 |
| iviailin | g Address 6127 S. Woodlawn Avenue | | | Transaction ID : SASL2.37738 |
| O:+ - | Apt. C | 01-1- | 7: 0 - 1 - | Amount of Each Receipt this Period |
| City Chicag | go | State | Zip Code 60637 | |
| • | of Employer or Principal Place of Business | IL | 00037 | 500.00 |
| · ·uiiie | o. Employer of Filliopal Flace of Dusilless | | | Aggregate Year-to-Date |
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| | Kutak Rock LLP PAC | Account : | 18789 | 10 17 2014 |
| ľ | Mailing Address 1650 Farnam Street | | | Transaction ID : SASL2.37689 |
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| | Dity | State | Zip Code | |
| | Omaha | NE | 68102 | 1000.00 |
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| | | Account : | 18789 | |
| 1 | Mailing Address 2601 N. 21 Road | | | |
| | | | | Transaction ID : SASL2.37288 Amount of Each Receipt this Period |
| (| City | State | Zip Code | Amount of Lacif Neceipt this Feriod |
| | Marseilles | IL | 61341 | 500.00 |
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| <i>-</i> . | Kwas Consulting Service, Inc. | A | 10700 | M = M / D = D / Y = Y = Y |
| - | Agiling Address | Account | 18789 | 10 01 2014 |
| ' | Mailing Address 9 W. Logan Street | | | Transaction ID : SASL2.37161 |
| - | N.A. | Ctata | 7: O | Amount of Each Receipt this Period |
| | City Lemont | State IL | Zip Code 60439 | |
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|). | Laird M. Ozmon, Ltd. | | | M = M / D = D / Y = Y = Y |
| _ | | Accoun | t: 18789 | 10 12 2014 |
| ľ | Mailing Address 54 North Ottawa Street | | | Transaction ID : SASL2.37257 |
| | | | | Amount of Each Receipt this Period |
| (| Dity | State | Zip Code | |
| | Joliet | IL | 26099 | 5000.00 |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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| Full Name (Last, First, Middle Initial) / I | Full Organization Name | Date of Receipt |
| A. Lake Park Center | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account : 18789 | 09 28 2014 |
| Mailing Address 919 Washington Park | | Transaction ID : SASL2.37122 |
| C:h. | 01-1- | Amount of Each Receipt this Period |
| City Waukegan | State Zip Code IL 60085 | |
| Name of Employer or Principal Place o | | 6060.00 |
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| Full Name (Last Flort Medilla 1999 N. C. | Full Ourse insting Name | |
| Full Name (Last, First, Middle Initial) / FB. Law offices of John B. Kralove | | Date of Receipt |
| D. Law Unices of Julii D. Maiove | Account: 18789 | M = M / D = D / Y = Y = Y |
| Mailing Address 60 West Randolph Street | | 10 17 2014 |
| - 00 West Nandolph Gueet | | Transaction ID : SASL2.37690 |
| 4th Floor City | State Zip Code | Amount of Each Receipt this Period |
| Chicago | IL 60601 | 10000.00 |
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| C. Levin & Perconti | - 9 | |
| | Account: 18789 | 09 26 2014 |
| Mailing Address 325 North LaSalle | | Transaction ID : SASL2.37076 |
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| City | State Zip Code | Tancari of East Hossipt tills I office |
| Chicago | IL 60610 | 10000.00 |
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| D. Lifescan Laboratory, Inc. | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account: 18789 | 10 24 2014 |
| Mailing Address 5255 W. Golf Road | | Transaction ID : SASL2.37716 |
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| City Skokie | State Zip Code IL 60077 | |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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| Full Name (Last, First, Middle Initial) / Full Or | rganization Name | | Date of Receipt |
| Lindblad Construction | Account: 18 | 789 | 10 16 2014 |
| Mailing Address 717 East Cass Street | | | Transaction ID : SASL2.37290 |
| 0:: | | | Amount of Each Receipt this Period |
| City Joliet | State IL | Zip Code 60434 | |
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| Lydia Healthcare 1, LLC | J | | M M / D D / Y Y Y Y |
| | Account: 18 | 789 | 10 08 2014 |
| Mailing Address 13901 S. Lydia Avenue | | | Transaction ID : SASL2.37227 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Robbins | IL noon | 60472 | 10000.00 |
| Name of Employer or Principal Place of Busin | 11692 | | Aggregate Vegy to Data |
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| MAGELLAN HEALTH SERVICES, INC. EMPLOYE | EE COMMITTEE FOR GOOD GOV | 'ERNMENT | M = M / D = D / Y = Y = Y |
| | Account : | 18789 | 10 01 2014 |
| Mailing Address 6950 Columbia Gateway | | | Transaction ID : SASL2.37164 |
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| City Columbia | State MD | Zip Code 21046 | |
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| Manning Consulting Group | Iganization Name | | Date of Receipt |
| | Account : | 18789 | 10 22 2014 |
| Mailing Address 4705 Pelican Nest | · · · | | Transaction ID : SASL2.37705 |
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| Maragos & Maragos, Ltd. Mailing Address 1 North LaSalle Dity Chicago Name of Employer or Principal Place of Business Doccupation Full Name (Last, First, Middle Initial) / Full Organization McNabola Law Group, PC Mailing Address 55 West Wacker Drive Dity Chicago Name of Employer or Principal Place of Business | | Zip Code 60602 18789 Zip Code 60601 | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
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| City Chicago Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organization McNabola Law Group, PC Mailing Address 55 West Wacker Drive City Chicago | State IL Name Account: | Zip Code 60602 | Transaction ID : SASL2.37027 Amount of Each Receipt this Period 300.00 Aggregate Year-to-Date Date of Receipt 10 03 2014 Transaction ID : SASL2.37210 Amount of Each Receipt this Period |
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| | Account : | : 18789 | 10 19 2014 |
| Mailing Address 1151 East Warrenville Road | | | Transaction ID : SASL2.37699 |
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| Naperville | IL | 60563 | 10000.00 |
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| Mailing Address 8 E. Randolph Street | | | Transaction ID : SASL2.37031 |
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| Mailing Address 2929 Walker Avenue City State Zip Code Grand Rapids MI 49544 Name of Employer or Principal Place of Business City State Zip Code Aggregate Year-to-Date Full Name (Last, First, Middle Initial) / Full Organization Name MJS Associates, LLC Mailing Address P.O. Box 664 City State Zip Code Account: 18789 Date of Receipt Transaction ID: SASL2.37229 Amount of Each Receipt this Period Transaction ID: SASL2.37229 Amount of Each Receipt this Period Transaction ID: SASL2.37229 Amount of Each Receipt this Period | Full Name (Last, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt | |
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| 10050.00 | | | | Aggregate Year-to-Date | |
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| | DEMOCRATIC PARTY | OF ILLIN | 10IS | |
|----|--|-------------|-------------------|------------------------------------|
| | Full Name (Last, First, Middle Initial) / Full Organizat | tion Name | | Date of Receipt |
| | NASW PAC | Account : | 18789 | 09 25 2014 |
| | Mailing Address 404 South Well Street | | | Transaction ID : SASL2.37037 |
| | Dity | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60607 | 300.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
| ī | Occupation | | | |
| | Full Name (Last, First, Middle Initial) / Full Organizat | tion Name | | |
| | Nicolay & Dart, LLC | non rame | | Date of Receipt |
| | | Account : | 18789 | 09 25 2014 |
| | Mailing Address 33 N. Dearborn | | | Transaction ID : SASL2.37039 |
| | 2:4. | Chaha | 7:n Cada | Amount of Each Receipt this Period |
| | City Chicago | State IL | Zip Code 60602 | 500.00 |
| | Name of Employer or Principal Place of Business | | | 500.00 |
| | | | | Aggregate Year-to-Date |
| i | Occupation | | | |
| | Tall Name (Last Flat Middle In Fall Occasion | Can Mana | | |
| | Full Name (Last, First, Middle Initial) / Full Organizat Operating Engineers International F | | : 18789 | Date of Receipt 10 08 2014 |
| | Mailing Address 1125 17th Street NW | | | Transaction ID : SASL2.37661 |
| | 24. | 01-1- | 7'- 0-1- | Amount of Each Receipt this Period |
| | Dity Washington | State DC | Zip Code 20036 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | 10000.00 |
| | | | | Aggregate Year-to-Date |
| i | Occupation | | | |
| | Full Name (Last, First, Middle Initial) / Full Organizat | tion Name | | Date of Receipt |
| | Operating Engineers Local 399 Political Edi | | | M M / D D / Y Y Y Y |
| | , | Accour | it: 18789 | 10 08 2014 |
| | Mailing Address 2260 South Grtove Street | | | Transaction ID : SASL2.37231 |
| | | | | Amount of Each Receipt this Period |
| | Dity Chicago | State | Zip Code 60616 | |
| | Name of Employer or Principal Place of Business | IL | 00010 | 10000.00 |
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| Full Name (Last, First, Middle Initial) / Full Organ Operating Engineers Local 399 Po | | Fund | Date of Receipt |
|---|--------------|----------|--|
| Operating Engineers Local 399 FO | Account : | | 10 08 2014 |
| Mailing Address 2260 South Grtove Street | | | Transaction ID : SASL2.37660 |
| 2233 23411 311070 311001 | | | Amount of Each Receipt this Period |
| City | State | Zip Code | , anount of Each freeeight this remod |
| Chicago | IL | 60616 | -10000.00 |
| Name of Employer or Principal Place of Business | 3 | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | 7 7 7 7 |
| Full Name (Last, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| Operating Engineers Local 649 PAC | | | M M / D D / Y Y Y Y |
| | Account : | 18789 | 10 28 2014 |
| Mailing Address 6408 W. Plank Road | | | Transaction ID : SASL2.37726 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Peoria | IL | 61604 | 10000.00 |
| Name of Employer or Principal Place of Business | j | | Assessments Vision to S. |
| Occupation | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| Painters District Council 14 | | | · |
| | Account | : 18789 | 10 01 2014 |
| Mailing Address 1456 W. Adams | | | Transaction ID : SASL2.37167 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | , another of Each recorpt this i criot |
| Chicago | IL | 60607 | 300.00 |
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| | | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Organ | ization Name | | Date of Receipt |
| Painters District Council 14 | | | M = M / D = D / Y = Y = Y |
| | Accoun | t: 18789 | 10 01 2014 |
| Mailing Address 1456 W. Adams | | | Transaction ID : SASL2.37663 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago | IL | 60607 | -300.00 |
| Name of Employer or Principal Place of Business | ; | | Assessed V. S. S. |
| 0 | | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Org | Januzation Name | | Date of Receipt |
| Painters District Council No. 30 | Account : | 18789 | 10 01 2014 |
| Mailing Address 1905 Sequoia Drive | | | Transaction ID : SASL2.37664 |
| | | _ - | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Aurora Name of Employer or Principal Place of Busine | ess | 60506 | 300.00 |
| мать от Employer or Emilicipal Place of Busin | | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Org | ganization Name | | Date of Receipt |
| Pavalon & Gifford | | | Mam / Dab / Yayayay |
| | Account : | 18789 | 10 08 2014 |
| Mailing Address 2 North LaSalle Street | | | Transaction ID : SASL2.37232 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | Toolbrano i chou |
| Chicago | IL | 60602 | 10000.00 |
| Name of Employer or Principal Place of Busine | ess | | 7 |
| | | | Aggregate Year-to-Date |
| Occupation | | <u> </u> | |
| Full Name (Last, First, Middle Initial) / Full Org | ranization Name | | |
| PCI Political Account | garnzanon ivalne | | Date of Receipt |
| . Or i Ontioal Account | Account : | 18789 | M M / D D / Y Y Y Y Y |
| Mailing Address 8700 W. Bryn Mawr | Account: | .0.00 | 09 25 2014 |
| - 6700 W. BIYII Mawi | | | Transaction ID : SASL2.37041 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | IL | 60631 | 1000.00 |
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| | | | Aggregate Year-to-Date |
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| Full Name (Last, First, Middle Initial) / Full Org | anization Name | | Date of Receipt |
| PLS Financial Services | | | · |
| - | Account | t: 18789 | 10 17 2014 |
| Mailing Address One South Wacker Drive | · · · | | Transaction ID : SASL2.37691 |
| 36th Floor | | | Amount of Each Receipt this Period |
| City | State | Zip Code | oan or Laon neceipt this Fellou |
| Chicago | IL | 60606 | 7500.00 |
| Name of Employer or Principal Place of Busine | | | 7 7 |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| Α. | Policemens Benevolent & Protective Assn PAC Account: 18789 | | 10 08 2014 | |
| | Mailing Address 435 West Washington | | | Transaction ID : SASL2.37234 |
| | Oit. | 0/-1- | 7:n 0 - 1 - | Amount of Each Receipt this Period |
| | City Springfield | State IL | Zip Code 62702 | 2000 22 |
| | Name of Employer or Principal Place of Business | IL. | 02102 | 3000.00 |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| В. | PRAIRIE POLITICAL ACTION COMMIT | TEE | | M = M / D = D / Y = Y = Y |
| | A | Account : | 18789 | 10 09 2014 |
| | Mailing Address P.O. Box 2002 | | | Transaction ID : SASL2.37243 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Springfield | State | 2ip Code 62705 | 40000 00 |
| | Name of Employer or Principal Place of Business | iL | 52.00 | 10000.00 |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| C. | Preckwinkle for President | | | M = M / D = D / Y = Y = Y |
| | Mailing Address | Account | : 18789 | 11 01 2014 |
| | Mailing Address 1516 E. 53rd | | | Transaction ID : SASL2.37741 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60615 | 9000.00 |
| | Name of Employer or Principal Place of Business | | | 5500.50 |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
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| | Full Name (Last, First, Middle Initial) / Full Organiza | ation Name | | Date of Receipt |
| D. | Prime Care LTC | | 40700 | M = M / D = D / Y = Y = Y |
| | Mailing Address 420 Country Club Drive | Accour | nt: 18789 | 10 24 2014 |
| | 420 Country Club Drive | | | Transaction ID : SASL2.37717 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Bensenville | IL | 60106 | 1590.00 |
| | Name of Employer or Principal Place of Business | | | 1.555.00 |
| | | | | Aggregate Year-to-Date |
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| F | ull Name (Last, First, Middle Initial) / Full Organizati | ion Name | | Date of Receipt |
| Α. | Primera Engineers, Ltd. | | | M M / D D / Y Y Y Y |
| | | Account : | 18789 | 10 16 2014 |
| N | failing Address 100 South Wacker Drive | | | Transaction ID : SASL2.37292 |
| _ | | | | Amount of Each Receipt this Period |
| | ity | State | Zip Code | |
| | Chicago lame of Employer or Principal Place of Business | IL | 60606 | 1000.00 |
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| ī | lailing Address 118 Airway Drive | Account. | 10703 | 10 03 2014 |
| | 118 Airway Drive | | | Transaction ID : SASL2.37212 |
| <u></u> | ity | State | Zip Code | Amount of Each Receipt this Period |
| | Marion | IL | 62959 | 5000.00 |
| N | ame of Employer or Principal Place of Business | | | 5000.00 |
| | | | | Aggregate Year-to-Date |
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| | Proactive Strategies, Inc. | | | M M / D D / Y Y Y Y |
| | • | Account | : 18789 | 10 16 2014 |
| N | failing Address 1318 W. George Street | | | Transaction ID : SASL2.37293 |
| | | | | Amount of Each Receipt this Period |
| | ity | State | Zip Code | |
| | Chicago | IL | 60657 | 500.00 |
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| D. I | Property Casualty Insurance Assn. of Ameri | | 40700 | M M / D D / Y Y Y Y |
| <u></u> | failing Address 8700 West Bryn Mawr Avenue | Accour | nt: 18789 | 10 24 2014 |
| 10 | - 0700 West Dryff Mawi Avenue | | | Transaction ID : SASL2.37718 |
| _ | Suite 1200 S | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60031 | 2000.00 |
| | ame of Employer or Principal Place of Business | | | 3000.00 |
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| NAME OF COMMITTEE (In F | =mll) |
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| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
|---|----------------|-------------------|--|
| Racing Associations of Illinois | . | 2700 | M M / D D / Y T Y T Y |
| Mailing Address 26435 South Dixie Highway | Account : 18 | 5789 | 09 26 2014 |
| 26435 South Dixie Highway | | | Transaction ID : SASL2.37081 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Crete | IL | 60417 | 2500.00 |
| Name of Employer or Principal Place of Busines | SS | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
| Rainbow Beach Nursing Center | | 0700 | M = M / D = D / Y = Y = Y |
| Mailing Address | Account: 1 | 8789 | 09 28 2014 |
| Mailing Address 7325 S. Exchange | | | Transaction ID: SASL2.37125 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | State | 21p Code 60649 | 2050.00 |
| Name of Employer or Principal Place of Busines | | | 6252.00 |
| , | | | Aggregate Year-to-Date |
| Occupation | | | 33 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
| Ramanucci & Blandin | - | | Mam / Dad / Yayayay |
| | Account : | 18789 | 09 28 2014 |
| Mailing Address 321 N. Clark Street | | | Transaction ID : SASL2.37127 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago | IL | 60654 | 10000.00 |
| Name of Employer or Principal Place of Busines | SS | | |
| Occupation | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last First Middle 1999) / F. P. C. | nination None: | | |
| Full Name (Last, First, Middle Initial) / Full Orga Raucci & Sullivan Strategies | nization Name | | Date of Receipt |
| Naucoi & Juliivari Strategies | Account : | 18789 | M M / D D / Y Y Y Y |
| Mailing Address 3000 N. Sheridan Road | Account: | .5.55 | 09 25 2014 |
| Suuu N. Sheridan Koad | | | Transaction ID : SASL2.37045 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | IL | 60657 | 2500.00 |
| Name of Employer or Principal Place of Busines | | | 2555.00 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| | | | |
| JBTOTAL of Receipts This Page (optional) | | | 21252.00 |
| , | | | |
| OTAL This Period (last page this line number on | ly) | | |

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| Full Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
|---|-------------|----------|------------------------------------|
| Robert S. Molaro & Assoc. | | | M = M / D = D / Y = Y = Y |
| | Account : | 18789 | 09 25 2014 |
| Mailing Address 6808 W. Archer Avenue | | | Transaction ID : SASL2.37035 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago | IL | 60638 | 300.00 |
| Name of Employer or Principal Place of Business | | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
| Robert S. Molaro & Assoc. | mon Hamo | | |
| 1100011 O. MOIGIO & /10000. | Account : | 18789 | M M / D D / Y Y Y Y |
| Mailing Address 6808 W. Archer Avenue | Account. | 10.00 | 09262014 |
| 6808 W. Archer Avenue | | | Transaction ID : SASL2.37078 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | State IL | 60638 | |
| Name of Employer or Principal Place of Business | IL | 00030 | 500.00 |
| value of Employer of Filliopal Flace of Busiliess | | | Aggregate Veer to Data |
| Decumation | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
| Rubin & Norris, LLC | | | M = M / D = D / Y = Y = Y |
| | Account : | 18789 | 09 28 2014 |
| Mailing Address 205 W. Wacker Drive | | | Transaction ID : SASL2.37129 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago | IL | 60606 | 1450.00 |
| Name of Employer or Principal Place of Business | | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Organiza | tion Name | | Date of Receipt |
| S.I.R. Management, Inc. | | | |
| | Accoun | t: 18789 | M M / D D / Y Y Y Y |
| Mailing Address 6840 N. Lincoln Avenue | 7.000411 | | 09 25 2014 |
| 6840 N. Lincoln Avenue | | | Transaction ID : SASL2.37048 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Lincolnwood | IL | 60712 | |
| Name of Employer or Principal Place of Business | ıL | 00712 | 5000.00 |
| value of Employer of Finicipal Flace of Busiliess | | | Aggregate Veer to Date |
| Decumetion | | | Aggregate Year-to-Date |
| Occupation | | | |
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| | | | |
| BTOTAL of Receipts This Page (optional) | | | 7250.00 |
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Use separate schedule(s) for each category of the Aggregation Page

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| Full Name (Last, First, Middle Initial) / Full Organization Name | | | Date of Receipt |
|--|-------------|-------------------|------------------------------------|
| Salvi Schostok & Pritchard, P.C. | | | M = M / D = D / Y = Y = Y |
| Mailing Addraga | Account : | 18789 | 09 26 2014 |
| Mailing Address 218 North Martin Luther King Ave. | | | Transaction ID : SASL2.37083 |
| 01. | | | Amount of Each Receipt this Period |
| City | State IL | Zip Code 60085 | |
| Waukegan Name of Employer or Principal Place of Business | IL | 60065 | 10000.00 |
| Name of Employer of Filincipal Flace of Business | | | Aggregate Year-to-Date |
| Occupation | | | Aggregate real to Bate |
| Cocupation | | | |
| Full Name (Last, First, Middle Initial) / Full Organiz | zation Name | | Date of Receipt |
| Sears Holdings Management Company | | | M = M / D = D / Y = Y = Y |
| | Account : | 18789 | 10 22 _ 2014 _ |
| Mailing Address 3333 Beverly Road | | | Transaction ID : SASL2.37708 |
| • | | | Amount of Each Receipt this Period |
| City | State | Zip Code | This are a fact the solid |
| Hoffman Estates | IL | 60179 | 5000.00 |
| Name of Employer or Principal Place of Business | | | 7 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | 7 7 7 |
| Full Name (Last, First, Middle Initial) / Full Organia | zation Name | | Date of Receipt |
| SEIU Illinois Council PAC Fund | | | M M / D D / Y Y Y Y |
| | Account : | 18789 | 10 01 2014 |
| Mailing Address 111 East Wacker Drive | | | Transaction ID : SASL2.37170 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago | IL | 60601 | 10000.00 |
| Name of Employer or Principal Place of Business | | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | 7 7 |
| Full Name (Last, First, Middle Initial) / Full Organia | zation Name | | Date of Receipt |
| SEIU Local 73 PAC | | | M = M / D = D / Y = Y = Y |
| | Accoun | t: 18789 | 09 25 2014 |
| Mailing Address 300 S. Ashland | | | Transaction ID : SASL2.37050 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago | IL | 60607 | 10000.00 |
| Name of Employer or Principal Place of Business | | | |
| 0 | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | 9 9 |
| | | | |
| JBTOTAL of Receipts This Page (optional) | | | 35000.00 |
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Use separate schedule(s) for each category of the Aggregation Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| \rangle | DEMOCRATIC PARTY | OF ILLIN | NOIS | |
|-----------|---|-------------|-------------------|------------------------------------|
| | Il Name (Last, First, Middle Initial) / Full Organization Name | | | Date of Receipt |
| Α. | Senior Lifestyle Management Account: 18789 | | 10 14 2014 | |
| | Mailing Address 303 E. Wacker | | | Transaction ID : SASL2.37268 |
| | Otto | Otat | 7: 0 1 | Amount of Each Receipt this Period |
| | City Chicago | State IL | Zip Code 60601 | 1000.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
| | Occupation | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) / Full Organization Sharon Healthcare Woods, Inc. | on Name | | Date of Receipt |
| | | Account : | 18789 | 09 28 2014 |
| | Mailing Address 3223 West Richwoods Boulevard | | | Transaction ID : SASL2.37131 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Peoria Name of Employer or Principal Place of Business | IL | 61604 | 4376.40 |
| | , , , , | | | Aggregate Year-to-Date |
| | Occupation | | | |
| _ | Full Name (Last, First, Middle Initial) / Full Organization | on Name | | Date of Receipt |
| U. | Shaw Decremer Consulting | Account | : 18789 | M M / D D / Y Y Y Y Y Y 10 16 2014 |
| | Mailing Address 2857 W. Leland | | | Transaction ID : SASL2.37295 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Chicago | IL | 60625 | 500.00 |
| | Name of Employer or Principal Place of Business | | | Aggregate Year-to-Date |
| | Occupation | | | 1.00.00010 100.10 200 |
| | | | | |
| _ | Full Name (Last, First, Middle Initial) / Full Organization | on Name | | Date of Receipt |
| D. | Sheila Simon for Illinois | | | M = M / D = D / Y = Y = Y |
| | Matter Address | Accour | nt: 18789 | 10 01 2014 |
| | Mailing Address P.O. Box 814 | | | Transaction ID : SASL2.37172 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Carbondale | State | 2ip Code 62903 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | 10000.00 |
| | Occupation | | | Aggregate Year-to-Date |
| | Оссираноп | | | |
| S | SUBTOTAL of Receipts This Page (optional) | | > | 15876.40 |
| Т | OTAL This Period (last page this line number only) | | ····· | |

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| 0 | ation Name | | Date of Receipt |
|---|----------------|-----------|------------------------------------|
| Simmons Hanly Conroy | | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account : | 18789 | 10 03 2014 |
| Mailing Address One Court Street | | | Transaction ID : SASL2.37214 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Alton | State | 62002 | 10000.00 |
| Name of Employer or Principal Place of Business | | | 10000.00 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Organiz | ation Name | | Date of Receipt |
| Skokie Meadows Nsg. | | | M = M / D = D / Y = Y = Y |
| | Account : | 18789 | 10 08 2014 |
| Mailing Address 4600 Golf Road | | | Transaction ID : SASL2.37236 |
| 011 | | . | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Skokie Name of Employer or Principal Place of Business | IL | 60076 | 3280.00 |
| Traine of Employer of Filliopal Flace of business | | | |
| Occupation | | | Aggregate Year-to-Date |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Organiz | ration Name | | |
| Sprinkler Fitters Local 281 | -auon Ivallio | | Date of Receipt |
| opinimor i moro Local 201 | Account : | : 18789 | 09 28 2014 |
| Mailing Address 11900 South Laramie | , isodant . | | 7 Transaction ID : SASL2.37133 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | or Each Hoodpt this I chou |
| Alsip | IL | 60803 | 2000.00 |
| Name of Employer or Principal Place of Business | | | |
| 0 | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Organiz | zation Name | | Date of Receipt |
| SRL Consulting, Inc. | | 4 . 10700 | M = M / D = D / Y = Y = Y |
| Mailing Address | Accoun | it: 18789 | 09 |
| Mailing Address 413 West Edwards | | | Transaction ID : SASL2.37052 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Springfield | IL | 62704 | 300.00 |
| Name of Employer or Principal Place of Business | · - | | 300.00 |
| , | | | Aggregate Year-to-Date |
| Occupation | | | T |
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| UBTOTAL of Receipts This Page (optional) | | | 15580.00 |

Use separate schedule(s) for each category of the Aggregation Page

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| | ny information copied from such Reports and Statement for commercial purposes, other than using the name a | | | |
|----|---|-------------|-------------------|---|
| | NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY (| | NOIS | |
| _ | Full Name (Last, First, Middle Initial) / Full Organizatio | n Name | | Date of Receipt |
| Α. | Stagehands Union Local no. 2 | | | M = M / D = D / Y = Y = Y |
| | Mailing Address | Account : | 18789 | 09 28 2014 |
| | Mailing Address 216 S. Jefferson | | | Transaction ID : SASL2.37135 |
| | 0:: | O | 7: 0 ! | Amount of Each Receipt this Period |
| | City | State IL | Zip Code 60661 | |
| | Chicago Name of Employer or Principal Place of Business | IL . | 00001 | 5000.00 |
| | Thante of Employer of Fillicipal Flace of Business | | | Aggregate Year-to-Date |
| | Occupation | | | 1 99 99 10 10 11 11 |
| | Cocapation | | | |
| | Full Name (Last, First, Middle Initial) / Full Organizatio | n Name | | , , |
| R | Stand for Children Illinois PAC | iii ivaille | | Date of Receipt |
| ٠. | Staria for Stillaron illinois i 718 | Account : | 18789 | 10 03 2014 |
| | Mailing Address 850 W. Jackson Boulevard # 330 | | | |
| | ood W. dadkoon Bodiovala ii ood | | | Transaction ID : SASL2.37216 Amount of Each Receipt this Period |
| | City | State | Zip Code | Amount of Lacif Neceipt this Feriod |
| | Chicago | IL | 60607 | 10000.00 |
| | Name of Employer or Principal Place of Business | | | |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
| | | | | 7 7 |
| | Full Name (Last, First, Middle Initial) / Full Organizatio | n Name | | Date of Receipt |
| C. | State Street Public Affairs, LLC | | | M = M / D = D / Y = Y = Y |
| | | Accoun | t: 18789 | 10 29 2014 |
| | Mailing Address 100 S. Atkinson Road | | | Transaction ID : SASL2.37730 |
| | 011 | | | Amount of Each Receipt this Period |
| | City Grayslake | State IL | Zip Code 60030 | |
| | Name of Employer or Principal Place of Business | IL | 60030 | 500.00 |
| | Name of Employer of Fillicipal Flace of Business | | | Aggregate Year-to-Date |
| | Occupation | | | Aggregate rear-to-Date |
| | Occupation | | | |
| _ | Full Name (Last, First, Middle Initial) / Full Organizatio | n Nama | | |
| n | Steve Davis Consulting, Inc. | n name | | Date of Receipt |
| υ. | Oleve Davis Consulting, Inc. | Accou | unt: 18789 | M M / D D / Y Y Y Y |
| | Mailing Address 316 N. Old Bethalto Road | 710000 | 10700 | 10 08 2014 |
| | 5 316 N. Old Bethallo Road | | | Transaction ID : SASL2.37238 |
| | City | State | Zip Code | Amount of Each Receipt this Period |
| | Bethalto | IL | 62010 | 500.00 |
| | Name of Employer or Principal Place of Business | | | |
| | | | | Aggregate Year-to-Date |
| | Occupation | | | |
| | | | | |
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| s | SUBTOTAL of Receipts This Page (optional) | | | 16000.00 |
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILL INOIS

| DEMOCRATIC PAR | | UIS | |
|---|------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) / Full Org | yanızadon Name | | Date of Receipt |
| Stricklin & Associates | Account: 1 | 8789 | 10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address 20 S. Clark Street | | | Transaction ID : SASL2.37173 |
| O:h. | 2 1 · | 71. 0 1 | Amount of Each Receipt this Period |
| City | State IL | Zip Code 60603 | |
| Chicago Name of Employer or Principal Place of Busin | | 00003 | 1000.00 |
| name of Employer of Efficipal Flace of Busin | 533 | | Aggregate Year-to-Date |
| Occupation | | | Aggregate rear-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full Org | ganization Name | | Date of Receipt |
| Supporters of Jack D. Franks | | | · |
| | Account : | 18789 | 10 22 2014 |
| Mailing Address P.O. Box 274 | | | |
| 1 .O. DOX 274 | | | Transaction ID : SASL2.37700 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Woodstock | IL | 60098 | 5000.00 |
| Name of Employer or Principal Place of Busin | | | 3000.00 |
| | | | Aggregate Year-to-Date |
| Occupation | | | 1.09.09410 104110 |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Org | ganization Name | | Date of Receipt |
| Tapella & Eberspacher, LLC | | | M = M / D = D / Y = Y = Y |
| • | Account : | 18789 | 09 28 2014 |
| Mailing Address P.O. Box 627 | | | Transaction ID : SASL2.37137 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | Amount of Lacif Necelpt this Fellod |
| Mattoon | IL | 61938 | 2500.00 |
| Name of Employer or Principal Place of Busin | ess | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Org | ranization Name | | |
| Teamsters Volunteers in Politics | gamzanon ivaille | | Date of Receipt |
| roamstors volunteers in rolling | Account | : 18789 | M = M / D = D / Y = Y = Y = Y |
| Mailing Address 1645 West Jackson Boulevard | Account | . 10709 | 10 12 2014 |
| 1645 West Jackson Boulevard | | | Transaction ID : SASL2.37259 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago | State | 2ip Code 60612 | |
| Name of Employer or Principal Place of Busin | | 00012 | 10000.00 |
| Tame of Employer of Amolpar Face of Busin | | | Aggregate Year-to-Date |
| Occupation | | | |
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| | | | 40500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 18500.00 |
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Use separate schedule(s) for each category of the Aggregation Page

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| DEMOCRATIC PART Full Name (Last, First, Middle Initial) / Full Orga | | | Date of Receipt |
|--|----------------|-------------------|--|
| Tech Plot, Inc. | | | M M / D D / Y Y Y Y |
| Mailing Address 20 North Wacker Drive | Account : | 18789 | 10 17 2014 |
| 20 NOTH WACKET DITVE | | | Transaction ID : SASL2.37693 Amount of Each Receipt this Period |
| City | State | Zip Code 60606 | |
| Chicago Name of Employer or Principal Place of Busines | IL SS | 60606 | 1250.00 |
| , , , , , , , , , , , , , , , , , , , | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | nization Name | | Date of Receipt |
| The Pollak Law Firm | | | Mam / Dab / Yayayay |
| | Account : | 18789 | 09 25 2014 |
| Mailing Address 900 Skokie Boulevard | | | Transaction ID : SASL2.37043 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Northbrook | IL | 60062 | 500.00 |
| Name of Employer or Principal Place of Busines | SS | | |
| Occupation | | | Aggregate Year-to-Date |
| | | | |
| Full Name (Last, First, Middle Initial) / Full Orga | inization Name | | Date of Receipt |
| The Roosevelt Group | Account | : 18789 | M = M / D = D / Y = Y = Y |
| Mailing Address 600 W. Van Buren Street | Account | . 10709 | 10 17 2014 Transaction ID : SASL2.37692 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago Name of Employer or Principal Place of Busines | IL SS | 60607 | 2500.00 |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| Full Name (Least First Middle Jeifel) (Full Occ | | | |
| Full Name (Last, First, Middle Initial) / Full Orga Thornton Heights Terrace, Ltd. | mization name | | Date of Receipt |
| • | Accour | t: 18789 | 09 28 2014 |
| Mailing Address 160 West Tenth Street | | | Transaction ID : SASL2.37139 |
| City | State | Zip Code | Amount of Each Receipt this Period |
| Chicago Heights | IL | 60411 | 6377.04 |
| Name of Employer or Principal Place of Busines | | | 3377.07 |
| Occupation | | | Aggregate Year-to-Date |
| Occupation | | | |
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| NAME OF COMMITTEE (In Full) | | |
|-----------------------------|------|--|
| | | |

| - : 0 - 1 :: | ull Name (Last, First, Middle Initial) / Full Organization Name | | |
|---|---|---|--|
| Time-O-Matic | | | M = M / D = D / Y = Y = Y |
| Mailing Address | Account : | 18789 | 10 17 2014 |
| Mailing Address 1015 Maple Street | | | Transaction ID : SASL2.37694 |
| City | Ct-t- | 7:n 0-1- | Amount of Each Receipt this Period |
| City Danville | State IL | Zip Code 61832 | **** |
| Name of Employer or Principal Place of Busin | | J.002 | 2500.00 |
| | - | | Aggregate Year-to-Date |
| Occupation | | | + |
| · | | | |
| Full Name (Last, First, Middle Initial) / Full Org | nanization Name | | Date of Receipt |
| Turner Group Company | James Hallio | | <u> </u> |
| | Account : | 18789 | 09 25 2014 |
| Mailing Address 2102 S. Avers Avenue | Feelitt I | | |
| J. // Volume | | | Transaction ID : SASL2.37054 Amount of Each Receipt this Period |
| City | State | Zip Code | San or Laon Hoosipt this Fellou |
| Chicago | IL | 60623 | 1500.00 |
| Name of Employer or Principal Place of Busin | ess | | |
| | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | 7 |
| | · · | . 40700 | M M / D D / Y Y Y Y |
| Mailing Address 8000 EAST JEFFERSON | Account | : 18789 | 10 24 2014 Transaction ID : SASL2.37720 |
| <u> </u> | | | 10 24 2014 |
| Mailing Address 8000 EAST JEFFERSON : City DETROIT | Account State MI | Zip Code 48214 | Transaction ID : SASL2.37720 Amount of Each Receipt this Period |
| City . | State MI | Zip Code | 10 24 2014 Transaction ID : SASL2.37720 |
| City DETROIT | State MI | Zip Code | Transaction ID : SASL2.37720 Amount of Each Receipt this Period |
| City DETROIT Name of Employer or Principal Place of Busin | State MI | Zip Code | 10 24 2014 Transaction ID : SASL2.37720 Amount of Each Receipt this Period 10000.00 |
| City DETROIT | State MI | Zip Code | 10 24 2014 Transaction ID : SASL2.37720 Amount of Each Receipt this Period 10000.00 |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org | State MI ess | Zip Code | 10 24 2014 Transaction ID : SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org | State MI ess | Zip Code | Transaction ID : SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal | State MI ess | Zip Code 48214 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt |
| City DETROIT Name of Employer or Principal Place of Busin Occupation | State MI ess | Zip Code 48214 | 10 24 2014 Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue | State MI ess ganization Name Accour | Zip Code 48214 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10000.00 Date of Receipt 10000.00 |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City | State MI ess ganization Name Accour | Zip Code 48214 ht: 18789 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City Cicero | State MI ess ganization Name Accour | Zip Code 48214 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City | State MI ess ganization Name Accour | Zip Code 48214 ht: 18789 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 Amount of Each Receipt this Period |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City Cicero Name of Employer or Principal Place of Busin | State MI ess ganization Name Accour | Zip Code 48214 ht: 18789 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 Amount of Each Receipt this Period |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City Cicero | State MI ess ganization Name Accour | Zip Code 48214 ht: 18789 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 Amount of Each Receipt this Period 1500.00 Aggregate Year-to-Date |
| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City Cicero Name of Employer or Principal Place of Busin | State MI ess ganization Name Accour | Zip Code 48214 ht: 18789 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 Amount of Each Receipt this Period |
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| City DETROIT Name of Employer or Principal Place of Busin Occupation Full Name (Last, First, Middle Initial) / Full Org United Scrap Metal Mailing Address 1545 S. Cicero Avenue City Cicero Name of Employer or Principal Place of Busin | State MI ess ganization Name Accour State IL | Zip Code 48214 ht: 18789 Zip Code 60804 | Transaction ID: SASL2.37720 Amount of Each Receipt this Period 10000.00 Aggregate Year-to-Date Date of Receipt 10 09 2014 Transaction ID: SASL2.37241 Amount of Each Receipt this Period 1500.00 Aggregate Year-to-Date |

Use separate schedule(s) for each category of the Aggregation Page

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| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
|--|------------------|-------------------|------------------------------------|
| University Public Issues Comm | • | | M M / D D / Y Y Y Y Y |
| · | Account: 18789 | | |
| Mailing Address P.O. Box 62 | | | Transaction ID : SASL2.37056 |
| City | | 75-0-1 | Amount of Each Receipt this Period |
| City Evanston | State IL | Zip Code 60204 | |
| Name of Employer or Principal Place of Busi | | | 150.00 |
| , | | | Aggregate Year-to-Date |
| Occupation | | | |
| | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| Vincent R. Williams & Associates, | | | M M / D D / Y Y Y Y Y |
| · | | 18789 | 09 25 2014 |
| Mailing Address 749 Ashland Avenue | | | Transaction ID : SASL2.37058 |
| | | | Amount of Each Receipt this Period |
| City River Forest | State | Zip Code | |
| Name of Employer or Principal Place of Busi | iness | 60305 | 500.00 |
| 3. Employor of Filliopal Flace Of DUS | | | Aggregate Year-to-Date |
| Occupation | | | ייששויטשענט ויטמו־נט־טמנט |
| | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | Date of Receipt |
| Vision M.A.I. | J | | Date of Receipt |
| | Account : | : 18789 | 10 16 2014 |
| Mailing Address 1001 W. 15th Street | | | Transaction ID : SASL2.37297 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Chicago Name of Employer or Principal Place of Busi | iness | 60608 | 500.00 |
| Name of Employer or Principal Place of Busi | | | Aggregate Vear-to Data |
| Occupation | | | Aggregate Year-to-Date |
| _P | | | |
| Full Name (Last, First, Middle Initial) / Full O | rganization Name | | |
| Walgreens 104 Wilmot | Januarion Name | | Date of Receipt |
| - | Accoun | nt: 18789 | 10 24 2014 |
| Mailing Address 104 Wilmot Road | 35541 | | Transaction ID : SASL2.37721 |
| | | | Amount of Each Receipt this Period |
| City | State | Zip Code | |
| Deerfield | IL | 60015 | 5000.00 |
| Name of Employer or Principal Place of Busi | iness | | Aggregati Visit 5 |
| Occupation | | | Aggregate Year-to-Date |
| Occupation | | | |
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Use separate schedule(s) for each category of the Aggregation Page

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| Full Name (Last, First, Middle Initial) / Full Organization Name | | | Date of Receipt | | |
|---|---------------------------------|---------------------------------|---|--|--|
| Walsh, Knippen, Knight & Pollock | | | | | |
| Mailing Address | Account : | 18789 | 10 29 2014 | | |
| Mailing Address 2150 Manchester Road | | | Transaction ID : SASL2.37731 | | |
| City | State | Zip Code | Amount of Each Receipt this Period | | |
| Wheaton | IL | 60187 | 4000.00 | | |
| Name of Employer or Principal Place of Business | | | 4000.00 | | |
| | | | Aggregate Year-to-Date | | |
| Occupation | | | 1 | | |
| | | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi | zation Name | | Date of Receipt | | |
| Wight & Company | | | M = M / D = D / Y = Y = Y | | |
| Account: 18789 | | | 09 26 2014 | | |
| Mailing Address 2500 N. Frontage Road | | | Transaction ID : SASL2.37085 | | |
| | | | Amount of Each Receipt this Period | | |
| City | State | Zip Code | 1355.pt 4110 1 01100 | | |
| Darien | IL | 60561 | 2500.00 | | |
| Name of Employer or Principal Place of Business | | | | | |
| 0 | | | Aggregate Year-to-Date | | |
| Occupation | | | | | |
| Full Name (Last, First, Middle Initial) / Full Organi | | | 7 7 | | |
| Mailing Address 724 Railroad | Account : | 18789 | 09 25 2014 | | |
| | | | Transaction ID : SASL2.37060 | | |
| City | Ctoto | Zin Codo | Transaction ID : SASL2.37060 Amount of Each Receipt this Period | | |
| City Joliet | State IL | Zip Code 60436 | Amount of Each Receipt this Period | | |
| - | IL | | | | |
| Joliet | IL | | Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business | IL | | Amount of Each Receipt this Period | | |
| Joliet | IL | | Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business | IL | | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date | | |
| Joliet Name of Employer or Principal Place of Business Occupation | IL | | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. | IL | 60436 | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. | IL IL Ization Name | 60436 | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel | IL ization Name Account | 60436 | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City | ization Name Account | 60436 : 18789 Zip Code | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL2.37141 | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago | ization Name Account State IL | 60436 | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL 2.37141 Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City | ization Name Account State IL | 60436 : 18789 Zip Code | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL2.37141 Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago Name of Employer or Principal Place of Business | ization Name Account State IL | 60436 : 18789 Zip Code | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL 2.37141 Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago | ization Name Account State IL | 60436 : 18789 Zip Code | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL2.37141 Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago Name of Employer or Principal Place of Business | ization Name Account State IL | 60436 : 18789 Zip Code | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL2.37141 Amount of Each Receipt this Period | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago Name of Employer or Principal Place of Business | ization Name Account State IL | 60436 : 18789 Zip Code | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL2.37141 Amount of Each Receipt this Period 5720.00 Aggregate Year-to-Date | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago Name of Employer or Principal Place of Business Occupation | ization Name Account State IL | 60436 :: 18789 Zip Code 60640 | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 9 28 2014 Transaction ID: SASL 2.37141 Amount of Each Receipt this Period 5720.00 Aggregate Year-to-Date | | |
| Joliet Name of Employer or Principal Place of Business Occupation Full Name (Last, First, Middle Initial) / Full Organi Wilson Care, Inc. Mailing Address 4544 North Hazel City Chicago Name of Employer or Principal Place of Business | ization Name Account State IL | 60436 :: 18789 Zip Code 60640 | Amount of Each Receipt this Period 150.00 Aggregate Year-to-Date Date of Receipt 09 28 2014 Transaction ID: SASL2.37141 Amount of Each Receipt this Period 5720.00 Aggregate Year-to-Date | | |

Use separate schedule(s) for each category of the Aggregation Page

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| Il Name (Last, First, Middle Initial) / Full Organization Ailling Address 680 North Lake Shore Suite 1900 | n Name | | Date of Receipt | |
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| ailing Address 680 North Lake Shore Suite 1900 | Account : | | _ = = = = = = = = = = = = = = = = = = = | |
| Suite 1900 | | Wirtz Corporation | | |
| Suite 1900 | Account. | 10709 | 10 22 2014 | |
| | | | Transaction ID : SASL2.37710 Amount of Each Receipt this Period | |
| | State | Zip Code | Amount of Each neceipt this Period | |
| nicago | IL | 60611 | 10000.00 | |
| ame of Employer or Principal Place of Business | | | | |
| | | | Aggregate Year-to-Date | |
| ccupation | | | | |
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| Il Name (Last, First, Middle Initial) / Full Organizatio | n Name | | Date of Receipt | |
| Zurich American Insurance Company | | | | |
| | Account : | 18789 | M M / D D / Y Y Y Y Y | |
| ailing Address 1400 American Lane | | | 09 28 2014 | |
| - 1400 American Lane | | | Transaction ID : SASL2.37143 | |
| ty | State | Zip Code | Amount of Each Receipt this Period | |
| chaumburg | IL | 60196 | 1000.00 | |
| ame of Employer or Principal Place of Business | | | 1000.00 | |
| h 171 - 1 han 1 mas 21 = man 1000 | | | Aggregate Year-to-Date | |
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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

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| NAME OF COMMITTEE (In Full) DEMOCRATIC | | LINOIS |
|--|------------------------------|--|
| Full Name (Last, First, Middle Initi A. DEMOCRATIC PARTY | | Date of Disbursement |
| Mailing Address P.O. BOX 518 | | 12 03 2014 Transaction ID : SBSL4D.37653 |
| City SPRINGFIELD Purpose of Disbursement Levin transfer to federal account | State Zip IL 627 | 375408.88 |
| Full Name (Last, First, Middle Initi B. DEMOCRATIC PARTY | | Date of Disbursement |
| Mailing Address P.O. BOX 518 | | 12 17 2014 Transaction ID : SBSL4D.37656 |
| City SPRINGFIELD Purpose of Disbursement Levin transfer to federal account | State Zip IL 627 | 84951.61 |
| Full Name (Last, First, Middle Init C. | al) / Full Organization Name | Date of Disbursement |
| Mailing Address | | |
| City Purpose of Disbursement | State Zip | Code Amount of Each Disbursement this Period |
| Full Name (Last, First, Middle Init D. | al) / Full Organization Name | Account: Date of Disbursement |
| Mailing Address | | |
| City Purpose of Disbursement | State Zip | Code Amount of Each Disbursement this Period Account: |
| Full Name (Last, First, Middle Init E. | al) / Full Organization Name | Date of Disbursement |
| Mailing Address | | |
| City Purpose of Disbursement | State Zip | Code Amount of Each Disbursement this Period Account: |
| SUBTOTAL of Disbursements This | Page (optional) | 460360.49 |
| TOTAL This Period (last page this I | ne number only) | 460360.49 |